

Preventing Blood Clots in COVID-19

This leaflet explains more about how you can help to reduce your risk of developing a blood clot when you have been admitted to hospital with COVID-19. If you have any further questions, please speak to a doctor, nurse or pharmacist caring for you.

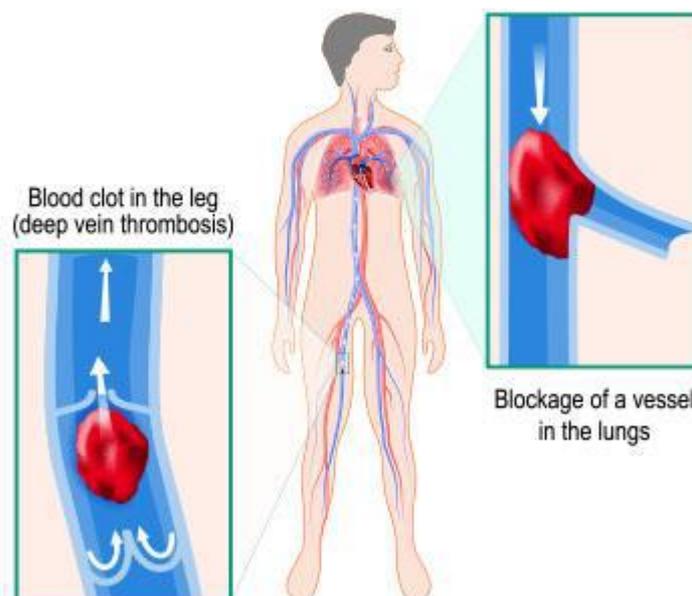
About blood clots

Deep vein thrombosis (DVT) and pulmonary embolism (PE) together are known as venous thromboembolism (VTE).

A DVT is a blood clot in a vein (a blood vessel) and it most commonly occurs in the legs. Signs and symptoms include: pain, swelling and discolouration of the affected limb.

A PE is a blockage of one or more of the blood vessels in the lungs. It is commonly caused by a blood clot that has developed in the legs and which then breaks off and travels to the lungs. Signs and symptoms include: shortness of breath, chest pain, coughing up blood and collapse in severe cases.

Hospitalised patients with COVID-19 infection are at increased risk of developing blood clots. Other risk factors include: surgery, trauma, long periods of inactivity, long journeys of over four hours duration or long unbroken car journeys, pregnancy and childbirth, certain types of oral contraceptive pill or hormone replacement therapy, obesity, cancer and previous VTE.



Preventing blood clots during hospital stay and when you go home

On admission to hospital, each patient over 16 years of age has their risk of developing a VTE assessed and if necessary preventative measures are advised. Feel free to ask your doctor, nurse or pharmacist what is being done to reduce your risk of VTE at any time during your stay in hospital and at the time of discharge home. They can also provide further information on the preventative treatment and possible side effects you might experience.

You may be given one or more of these treatments:

- **Medications**

Anticoagulants are drugs used to prevent and treat blood clots either in tablet or injection form. Patients infected with COVID-19 will also receive anticoagulants on discharge to prevent VTE (unless already receiving anticoagulation treatment). See additional information below. These medications may increase your risk of bleeding. The medical team overseeing your care will assess your risk of bleeding and if it is high you may receive other treatment.

- **Anti-embolism stockings (AES)**

You may be measured and fitted with AES. The stockings work by reducing damage to the leg veins that expand when you are not mobile and they help return blood to the heart. They should be worn day and night until you are back moving about as much as you did before.

AES are very effective in reducing DVT in surgical patients. It is important that you are shown how to put them on and how to care for them before you go home. Remove your stockings daily for hygiene purposes and to inspect the condition of your skin. If you notice any changes to your skin such as blisters or discolouration over the heels and bony prominences, please inform a member of staff. If you are not sure, please ask your nurse.

- **Compression devices**

These are air pumps and inflatable garments/sleeves that are fitted and wrapped around the legs and feet and kept in place while you are immobile in your hospital bed. A compression device is designed to improve venous circulation in the lower limbs. It inflates at regular intervals and the pressure increases the flow of blood back to the heart.

What can you do to help reduce your risk of developing blood clots?

- **Keep moving/ leg exercise**

It is important to move around as soon as possible. Point your toes down and bend the foot up and rotate your ankles at regular intervals. This helps pump the blood back to the heart.

- **Drink plenty of fluids**

Dehydration can also increase your risk of VTE so make sure you drink plenty of fluids.

Anticoagulation medication on discharge

National guidance recommends patients with COVID-19 should be discharged on anticoagulation for a short period of time. The choice of anticoagulation medication given to you will be based on various factors e.g. kidney function, body weight and the other medication that you are taking.

You will be prescribed either of the following for **10 days from discharge** for VTE prevention:

- **Rivaroxaban tablet**, 10mg once a day, taken approximately the same time each day, with or without food. Rivaroxaban is not licensed for the prevention of blood clots in people with COVID-19, but it is used for other indications to prevent clots. If you happen to miss a dose and remember on the same day, take the missed dose as soon as you remember on that day. Take the next dose on the following day and continue to take once a day. Do not take a double dose to make up for a missed dose.
- **Dalteparin subcutaneous injection**, with dose dependent on your weight. You, a relative or carer will be shown how to give the injections prior to discharge and will be provided with an additional information leaflet on administration and a sharps bin for disposal. On completing the course, the lid of the sharps bin should be sealed and returned to hospital. Some GP surgeries or local councils may agree to dispose of these bins. Please remember that it is illegal to dispose of injections or sharps bins in your household waste.

You will also be provided with administration instructions on the medication labels and hospital documentation. It is important you take your medication for the length of time advised and that you complete the course. The hospital should supply the full 10 day course and this should then be discontinued. Please also refer to the manufacturers information leaflet for additional information.

Please note that non-steroidal anti-inflammatory drugs (NSAIDs) such as ibuprofen, aspirin and naproxen can increase your risk of bleeding when taken with anticoagulants and should be avoided. If you are unsure, please check with your pharmacist or doctor.

What are the main side effects?

The most serious side effect of anticoagulants is bleeding. If you experience any of the following, seek medical attention:

- Prolonged nosebleeds (more than 10 minutes)
- Blood in vomit
- Blood in sputum
- Passing blood in your urine or faeces
- Passing black faeces
- Severe or spontaneous bruising
- Unusual headaches.

Looking after yourself at home

Other measures can help to reduce your risk of developing a VTE. Keeping to a healthy weight and stopping smoking can help to lower the risk. Speak to your practice nurse for advice and for further tips visit www.nhs.uk/livewell/smoking

What should I do if I have a problem?

See your GP if you have any questions about VTE.

Important:

If you develop pain, swelling or redness in a leg or you suddenly become short of breath, have chest pain or cough up blood, please urgently attend your Accident and Emergency Department.

Useful sources of information

For further information please visit

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

Contact us

If you have any questions or concerns about VTE, please contact the thrombosis team on 020 8725 1332 (Monday to Friday, 9am to 5pm). Out of hours, please contact 020 8672 1255 and ask for the on-call haematology registrar.

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

Additional services

Patient Advice and Liaison Service (PALS)

PALS can offer you on-the-spot advice and information when you have comments or concerns about our services or the care you have received. You can visit the PALS office between 9.30am and 4.30pm, Monday to Friday in the main corridor between Grosvenor and Lanesborough wings (near the lift foyer).

Tel: 020 8725 2453 **Email:** pals@stgeorges.nhs.uk

NHS Choices

NHS Choices provides online information and guidance on all aspects of health and healthcare, to help you make decisions about your health.

Web: www.nhs.uk

NHS 111

You can call 111 when you need medical help fast but it's not a 999 emergency. NHS 111 is available 24 hours a day, 365 days a year. Calls are free from landlines and mobile phones.

Tel: 111

AccessAble

You can download accessibility guides for all of our services by searching 'St George's Hospital' on the AccessAble website (www.accessable.co.uk). The guides are designed to ensure everyone – including those with accessibility needs – can access our hospital and community sites with confidence.



Reference: CLH_PBCC_01 **Published:** January 2021 **Review date:** January 2023