



The Clatterbridge
Cancer Centre
NHS Foundation Trust

Cancer and Blood Clots – what you should know

Nursing



A guide for patients and carers

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Please read this leaflet carefully. It will give you information about decreasing the chance of developing a blood clot during and after your hospital stay.

If you are living with cancer you will be aware that both the cancer and its treatment are associated with potential complications. One such complication is an increased risk of developing blood clots (also known as Venous Thromboembolism).

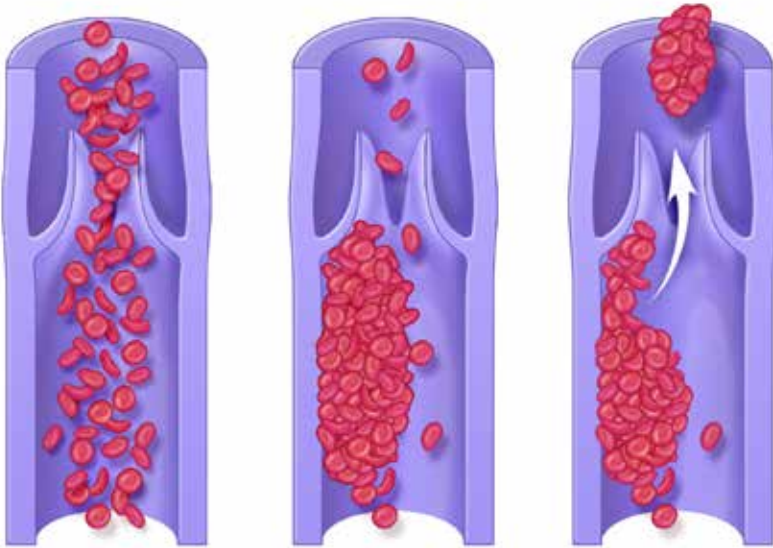


What is Venous Thromboembolism (VTE)?

There are two types of VTE:

Deep Vein Thrombosis (DVT): a blood clot (also known as a thrombosis) that forms in a deep vein, most commonly in the legs but they can also occur in the arms.

Pulmonary Embolism (PE): if all or part of the DVT breaks free and passes through your blood vessels, it can reach your lungs. This is called a PE.



Normal blood
flow

A clot has
formed

Part of the clot
has broken off

Signs and symptoms of VTE

DVT - Symptoms can include swelling, redness/discolouration, warmth and tenderness/pain that may be worse when standing or walking. Occasionally there are no symptoms except pain.



PE - Symptoms can include coughing, chest pain, breathlessness, blood stained phlegm or you may collapse.

If you develop any of these symptoms please get medical advice immediately.

Cancer Associated Thrombosis (CAT) is the name for a blood clot that develops when you also have cancer.

There are several reasons why you might develop a blood clot when you have cancer, which are detailed below:

- **Type of Cancer:** The types of cancer that are most likely to increase your risk of blood clots are: Stomach, Pancreas, Lung, Lymphoma, Gynaecological, Brain, Kidney



- **Cancer treatments:** Some cancer treatments can increase your risk of developing a blood clot. They include some types of Chemotherapy, Hormone therapy such as: tamoxifen and anastrozone, Immunomodulatory drugs such as: thalidomide and lenalidomide, Antiangiogenic therapies such as bevacizumab and sunitinib and supportive agents such as erythropoietin and darbopoetin
- **Other effects:** Reduced mobility due to cancer treatments, blood vessel damage from surgery, or having a central venous catheter are other possible risk factors for getting a blood clot

Other risk factors for blood clots include:

- Past history of blood clot
- Being overweight
- Reduced mobility (not walking or moving around)
- Combined contraceptives (i.e. the Pill, the contraceptive patch (Evra®) or the vaginal ring (Nuvaring®))
- Hormone replacement therapy (HRT)
- Recent surgery especially on hips or knees
- Age over 60 years
- Pregnancy or given birth in the past six weeks
- Dehydration
- Smoking
- Varicose veins with phlebitis

- A close relative has had a blood VTE e.g. mother, father, brother, sister, child
- Known thrombophilia (inherited blood clotting disorders)
- Long distance travel of more than four hours within the last eight weeks.

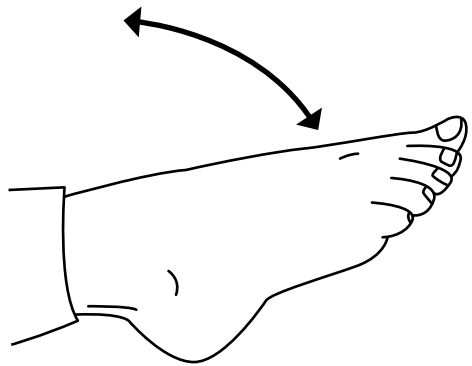
Fortunately, you can reduce the risks associated with this condition.

How can I help to reduce my risk of developing a blood clot?

- Drinking plenty of water or other non-alcoholic drinks to keep well hydrated (unless advised otherwise)
- Moving around as much as you can
- Wearing the anti-embolism stockings or other devices you are given
- Taking any medication you have been prescribed.

Carry out the following leg exercises (even if you are in bed):

- Lying on your back or sitting, bend and straighten your ankles quickly 10 times



- Keep your knees straight during the exercise to stretch your calf muscles
- Try to do this exercise two or three times an hour

How will hospital staff help me reduce my risk while I am in hospital?

There are a number of methods that can be used to reduce your risk of developing a blood clot whilst you are in hospital. The methods that you use during your hospital stay will depend on your level of risk.

When you come into hospital your cancer doctor will assess your risk of developing a blood clot. During your hospital stay your risk may change so you will be re-assessed throughout your stay.

Some of the ways that we reduce the risk are:

Encouraging you to remain as mobile as possible. This may include asking you to regularly perform the leg exercises in this leaflet.

- Encouraging you to drink plenty of fluids. If you cannot drink, this fluid may be provided by a drip into your vein
- Providing you with elastic stockings to be worn on both legs. These encourage blood flow through the legs and reduce



the risk of VTE's. blood clots It is important that stockings are the correct size so your legs will be measured to ensure correct fit. You may find them a little uncomfortable and tight at first, but most people get used to them.

- Giving you a daily injection of a low dose heparin. This medicine thins the blood and makes blood clot less likely to form. These injections go just under the skin into the fatty layer and are usually given in the stomach, thigh or upper arm. The injection is usually given in the evening.

Low dose heparin is made from pork derived heparin sodium. If you have any questions or concerns about this please speak to your nurse, pharmacist or cancer doctor.

There is a risk of bleeding following use of heparin. You will be assessed for your risk of bleeding. Please let a member of ward staff know if you develop unexplained bruises or any bleeding.

If you have any questions about the risk of developing a blood clot whilst in hospital or about any of the things described above to reduce the risk, speak to your cancer doctor or nurse.



How do I use the elastic stockings?

To ensure the stockings are effective:

- Ensure the stockings are not wrinkled. Otherwise they will dig into the skin underneath and can cause tissue damage
- Do not turn/roll down the top of the stockings. This may interfere with the blood flow in your legs
- If you experience tingling or numbness in your legs tell a member of ward staff. This means that the stockings are too tight. The nurse will need to reassess your legs
- The stockings should be worn day and night while you are immobile
- You or your nurse should remove the stockings at least once a day to wash and dry your legs. Apply a non-perfumed moisturiser after you dry your legs. Whilst washing your legs look at the skin. If there are any signs of blisters or red marks that do not disappear, particularly on the heels, shin and toes, you should stop wearing the stockings. Tell a nurse if you see these marks.

How will I be monitored during my admission?

Members of the nursing and medical team will review your progress throughout your inpatient stay but it is important to report to the nurse or doctor any of the following symptoms:

- Breathlessness
- Chest pain
- Tenderness, swelling or pain in your calf area
- Bleeding or unexplained bruising (if you are being given heparin injections).

How can I reduce my risk after going home from hospital?

You should continue to drink plenty of water or other non-alcoholic drinks to keep hydrated (unless advised otherwise) and move around as much as you can.

If you are at high risk of developing a blood clot you will need to continue to reduce your risks when you go home.

You may need to wear stockings for a period of time at home or be given some exercises to do at home. You may be asked to continue low-dose heparin injections to thin your blood for some time after you go home. If this is the case your cancer doctor or nurse will talk to you about this before you go home.



What do I do if I develop symptoms when I go home?

If you develop sudden shortness of breath and/or chest pain ring 999 immediately.

If you develop new swelling, tenderness and/or pain of your leg or arm you should ring The Clatterbridge Cancer Centre Hotline on **0800 169 5555**.

Useful sources of information:

- Please ask your cancer doctor, nurse or pharmacist for more information.
- NHS choices website for patient information on blood clots. Visit **www.nhs.uk/Conditions/Thrombosis**
- Lifeblood: The thrombosis charity also has more information. Visit **www.thrombosis-charity.org.uk**

How we produce our information

All of our leaflets are produced by staff at The Clatterbridge Cancer Centre and this information is not sponsored or influenced in any way. Every effort is made to ensure that the information included in this leaflet is accurate and complete and we hope that it will add to any professional advice you have had. All our leaflets are evidence based where appropriate and they are regularly reviewed and updated. If you are concerned about your health in any way, you should consult your healthcare team.

We rely on a number of sources to gather evidence for our information. All of our information is in line with accepted national or international guidelines where possible. Where no guidelines exist, we rely on other reliable sources such as systematic reviews, published clinical trials data or a consensus review of experts. We also use medical textbooks, journals and government publications.

References for this leaflet can be obtained by telephoning 0151 556 5570.

If you need this leaflet in large print, Braille, audio or different language, please call 0151 556 5570.

If you have a comment, concern, compliment or complaint, please call 0151 556 5203.

The Clatterbridge Cancer Centre NHS Foundation Trust
Clatterbridge Road, Bebington,
Wirral, CH63 4JY.

Tel: 0151 556 5000

Web: www.clatterbridgecc.nhs.uk

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