Home Treatment for Deep Vein Thrombosis (DVT)  
Patient information leaflet & Patient passport

Surrey & Sussex Healthcare NHS trust  
NHS Surrey  
NHS West Sussex

Your care has been jointly planned by the hospital, your family doctor and community nursing to enable you to have treatment closer to home, without the need for admission to the hospital if at all possible.

We do hope that the service exceeds your expectations and we would welcome any comments to improve our services further.

**What is a Deep Vein Thrombosis (DVT)?**

A deep vein thrombosis is commonly called a DVT.

A DVT is a blood clot that forms in the deep veins within a limb, usually a leg and causes the leg to become hot, red, swollen and painful.

The outlook for DVT is good if diagnosed and treated promptly.

Complications of DVT can involve a part of the blood clot breaking off in the leg and travelling to the lungs. This could cause breathlessness, chest pain, faintness or palpitations and you would need to go to the hospital for assessment and usually admission.

It is therefore important that you let the nursing team know or seek help from your family doctor or out-of-hours service if you start to feel more unwell.

Another complication is post-thrombotic syndrome and can result in long-term swelling and discomfort in the affected leg. This is why we will issue you with compression stockings to wear and this will reduce the likelihood of complications.

**What causes a DVT?**

There are a number of causes of DVT.

They are more common if you have been immobile for some time or had recent surgery. They are also more common in patients who take certain hormone pills (OCP or HRT), smokers, those who are obese, pregnant women, patients with vasculitis, heart failure or cancer and in some patients the blood may have an inherited tendency to clot.

During your medical review these potential risk factors will be addressed.
What will happen during my assessment?

Your assessment may be carried out at a number of different places and these options should be discussed with you by the first person that sees you.

The assessment will include:

- A conversation about your symptoms and medical history
- An examination
- Blood tests
- If needed you will have an ultrasound scan of the leg

The ultrasound scan uses sound waves to look for a blood clot in the leg. It is completely painless and no needles are required. Gel is spread on the skin to allow the ultrasound machine to work, but this is quickly removed with a tissue.

What treatment will I have?

DVTs are treated in two ways.

First, we will offer you treatment with warfarin to thin out your blood which allows the clot to dissolve and prevents others from forming. Some patients may require daily injections rather than warfarin, but this will have been discussed with you if it applies to you.

In order to start warfarin we will also give you injections of Clexane (a type of heparin) which is similar to warfarin. These injections are given under the skin once a day and will continue until the warfarin reaches the correct level. This may take several days to achieve.

Warfarin must be taken regularly and monitored closely and therefore you will be referred to the anticoagulation service for blood tests and advice on how much warfarin to take. You will be told if this will be coordinated by your GP, or else from the hospital. If you are unsure about who is coordinating your warfarin please call us on the Acute Medical Unit at East Surrey Hospital on 01737 768 511.

The duration of warfarin therapy depends on the cause of your DVT. Some patients need warfarin for 6 weeks, others for the rest of their lives, however 3-6 months is the average length of the treatment course.

Further information will be given to you in the “Yellow Book” that all anticoagulated patients carry as their own personal record of their treatment.

The second treatment is with compression stockings.

These stockings drive the blood from the legs and prevent further blood clots from forming. You will need to wear these stockings for up to two years after your DVT to prevent a condition known as post-thrombotic syndrome. In this condition the leg may become
swollen, painful and develop rashes or rarely even ulcers. Therefore it is important that you wear the stockings and that they fit well.

**Will I have side effects from the warfarin?**

Most people do not experience any side effects whilst taking warfarin.

The most serious side effect of warfarin is bleeding. You must seek medical attention and have an urgent blood test if you experience any of the following:

- passing blood in your urine or faeces
- passing black faeces
- severe bruising
- long nosebleeds (lasting longer than 10 minutes)
- bleeding gums
- blood in your vomit or coughing up blood
- unusual headaches
- (in women) heavy or increased bleeding during your period, or any other bleeding from the vagina

You must seek immediate medical attention if you:

- are involved in a major accident
- experience a significant blow to the head
- are unable to stop any bleeding

Less common side effects of warfarin include:

- rashes
- nausea (feeling sick)
- vomiting
- diarrhoea

On rare occasions patients can have an allergic reaction to warfarin. If you experience a widespread rash, tongue or facial swelling, any difficulty in breathing or feeling very unwell, immediate help is required and someone should ring 999.

**Advice on self care**

Drink plenty of water to avoid dehydration unless you have been told not to. If your DVT causing pain an over-the-counter painkiller may ease your symptoms. Paracetamol is suitable if you are not currently taking a drug containing it. Please discuss with your pharmacist.

If you feel breathless, dizzy or have chest pain or palpitations at any time you should call an ambulance to come and assess you. These symptoms can be associated with a blood clot travelling to the lungs called a Pulmonary Embolism (PE) and requires urgent assessment.
What can I do if I have a problem?

If you need any assistance please call us on the Acute Medical Unit at East Surrey Hospital on 01737 768 511 and let the nurse know that you are on a DVT ambulatory pathway.

Of course you can always call NHS Direct on 0845 4647, or call an ambulance in an emergency.

What is a patient passport?

As your treatment is being coordinated by several NHS services it is important that you know that you will be most welcome to call or attend your local Walk-In-Centre, Urgent Treatment Centre or the Acute Medical Unit (AMU) at East Surrey Hospital if you cannot access the advice or assistance that you require by telephone.

You should present this passport if you need to go, however it is not required for you to be seen.

If you need to talk to the Nursing Staff on AMU please call them on 01737 768 511 and ask for the Acute Medical Unit. Tell the nurses that you are on an ambulatory pathway for DVT and they will be happy to help. The Unit is staffed 24 hours a day, 365 days a year.

Online Information

http://www.nhs.uk/Conditions/deep-vein-thrombosis/

Published by

Department of Acute Medicine
Surrey & Sussex Healthcare NHS Trust
East Surrey Hospital
Canada Avenue
Redhill
RH1 5RH

Launched: August 2011
Review date: August 2014

In partnership with

NHS Surrey
NHS West Sussex