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You are entitled to a copy of any letter we write about you. Please ask if you want one when you come to the hospital.

If you are unhappy with the advice you have been given by your GP, consultant, or another healthcare professional, you may ask for a second (or further) opinion.

The evidence used in the preparation of this leaflet is available on request. Please email: patient.information@salisbury.nhs.uk if you would like a reference list.

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Reducing the risk of blood clots in pregnancy and after the birth (page 1 of 2)

What is a thromboembolism and how can I reduce the risks of developing one in my pregnancy and after the birth?

It is a blood clot found in a vein or artery. Venous thrombosis occurs in a vein. A Deep Vein Thrombosis (DVT) is a blood clot that forms in a deep vein of the calf, leg or pelvis.

A DVT is a serious condition and could be potentially life threatening if the clot breaks off and travels through the blood stream to another part of the body such as the lungs. This is known as a Pulmonary Embolism (PE). DVT and PE are known under the collective terms of Venous Thromboembolism (VTE).

Fortunately these conditions are uncommon; however women who are pregnant or within 3 months of having given birth are thought to be more at risk of developing a DVT than women who are not pregnant.

What are the symptoms of a Thrombosis?

Typical symptoms include swelling, pain, calf tenderness and occasionally heat and redness in one leg compared to the other leg. If you are concerned that you may be experiencing any of these symptoms please contact your GP or labour ward urgently.

Is thrombosis preventable?

Most thrombosis is preventable. Treatment can be given to women who are thought to be at a higher risk of developing a deep vein thrombosis (DVT). At your booking appointment, your midwife will complete a short assessment with you, which will identify any risk factors. This assessment will be repeated several times throughout your pregnancy and every time you come in to hospital, as your risk of developing a DVT may change.

If you are considered to be at a higher risk of developing a DVT, your midwife will refer you to an obstetrician. The obstetrician will talk with you about this risk and explain why treatment may be advised in your case. In most cases we advise a course of treatment to prevent DVT following the birth of your baby. However, some risk factors, such as a personal history of a previous thrombosis, may be significant enough to offer you some preventative treatment during your pregnancy.

Maternity Unit
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In the event that you are admitted to hospital during your pregnancy you may be offered prophylaxis (preventative) treatment throughout the duration of your stay. In some cases, we would recommend that the treatment continues during your pregnancy and for some time after the birth.

Following the birth of your baby we will assess your risk again as it may change due to several factors such as the type of delivery you had. If you are considered to be at a higher of risk of developing a DVT, you will be offered a course of treatment to prevent this. This treatment will last between ten days and six weeks, depending on your risk factors. A low dose Low-Molecular-Weight- Heparin (LMWH) injection is the most commonly used treatment.

How can I reduce the risks of a thrombosis in pregnancy?

- Keep active
- Keep well hydrated. Continue to drink plenty of water.

If you smoke, stop smoking. Contact the NHS Stop smoking service for information and help.

How can I help to reduce the risks of a thrombosis after a caesarean section?

1. Get out of bed as soon as you can.
2. If you are unable to get out of bed, exercise your legs every hour:
 - Pump each foot up and down briskly for 30 seconds by moving your ankle
 - Move each foot in a circular motion for 30 seconds
 - Bend and straighten your legs-one leg at a time. Do this three times for each leg.
3. Take deep breaths. Every hour, sit up straight and take a couple of really deep breaths.
4. Drink plenty of fluid. You should drink up to a glass of water every hour throughout the day, unless your doctor has told you otherwise.

Your doctor or midwife will also assess your risk of a thrombosis and you may be prescribed heparin injections to reduce your risk.

How can I reduce the risks of a thrombosis following a vaginal birth?

It is important to mobilise as soon as possible after having your baby and you should avoid becoming dehydrated.