

Patient Information

Haematology

Reducing the risk of blood clots while having treatment for your cancer

This leaflet should be read along with the Thrombosis UK patient information leaflet “Cancer and the risk of blood clots”.

Your oncology doctor will have explained to you that the type of cancer that you have, the place where your cancer is or the type of chemotherapy that you will be having can increase your risk of developing a blood clot – one or more of these risks can mean that you may benefit from having some medication that can reduce the risk of the blood clot developing. This medication, called anticoagulation, may be given as either an injection or as tablets.

We must seek your consent for any procedure or treatment beforehand. Staff will explain the risks, benefits and alternatives where relevant before they ask for your consent. If you are unsure about any aspect of the procedure or treatment proposed, please do not hesitate to ask for more information.

Why does blood clot?

When we cut ourselves, we bleed. To stop us from bleeding too much, chemicals in our bloodstream help to form a clot. Sometimes a clot can form in the wrong place. People who are ill (including having cancer), have had surgery, or cannot move around as much as normal, are at an increased risk of blood clots forming in the wrong place.

What happens if a blood clot forms in the wrong place?

A deep vein thrombosis (DVT) is a blood clot in the veins, usually in the leg. This blocks the flow of blood around the body. The symptoms usually only affect one leg and include pain, redness and swelling. The problems that can last a long time after someone has a DVT include having a painful swollen leg, leg ulcers and mottling of the skin.

A pulmonary embolism (PE) is a piece of blood clot that has broken off and travelled to the lungs. It causes chest pain and serious breathing problems. Pulmonary embolism causes lasting lung damage and death in a small number of people.

Are there any side effects?

Because anticoagulation medication thins blood, it can make you bleed more easily. If you are at risk of bleeding problems your doctor may decide not to prescribe this medication. You should also read the information leaflet in the packet as it will tell you more about the side effects of the medication that you have been prescribed.

Is there anything I should look out for when I'm taking anticoagulation Medication?

Whilst you are taking the anticoagulation medication you must go to hospital straight away if you notice:

- you are bleeding a lot from a wound
- you have swelling around your wound or anywhere else
- you have a sudden very bad headache
- you have tenderness or swelling in your stomach

You should tell a nurse or doctor as soon as possible if you notice:

- you are bruising more easily than you normally do
- you feel more weak, tired or short of breath than normal

What else should I know about taking anticoagulation medication?

Your doctor may prescribe apixaban or rivaroxaban, anticoagulation medications approved to prevent blood clots in people who have an uneven heartbeat or have had hip or knee surgery. Apixaban and rivaroxaban are not yet officially approved to prevent blood clots in people with cancer. Giving you these medicines for cancer is called "off-label" or "unlicensed" use.

At this hospital senior doctors and pharmacists have decided that it is safe to use apixaban and rivaroxaban in this way and have been using them for several years. You can ask your doctor or nurse for a copy of the Trust's "Special Medicines (Unlicensed Medicinal Products)" information leaflet to explain more.

If you are unhappy with taking either apixaban or rivaroxaban talk to your doctor, nurse or pharmacist. There are other medicines that could be used (such as heparin injections).

You must not take apixaban or rivaroxaban if you are pregnant or have severe problems with your kidneys. There are other medicines that should be used instead (such as heparin injections).

How long do I need to take the medication for?

You will normally have to take the anticoagulation for at least as long as you are having chemotherapy. In some cases, you may be advised that it would be best to continue with it for the long-term – this decision would be made after discussion with

your oncology doctor. Your repeat prescriptions will need to be requested from your GP.

What should I do if I take more anticoagulation medication than I should?

If you have more than the prescribed dose in a day, then you should tell your doctor.

What should I do if I forget to take my anticoagulation medication?

If you remember the same day, then take the dose. If you remember the next day, then take your dose when it is next due. Do not take more than the prescribed dose each a day.

Can I do anything else to reduce my risk of blood clots?

You can help reduce your risk of getting a clot by:

- drinking plenty of water or other non-alcoholic drinks to keep hydrated
- moving around as much as you can
- carrying out inflight leg exercises when sat down for long periods of time

What signs and symptoms should I look out for?

You will need to watch for the following signs and symptoms of superficial vein thrombosis, deep vein thrombosis and pulmonary embolism.

Superficial Vein Thrombosis (ST) - also known as phlebitis

- Redness, tenderness, firmness, pain or warmth over a superficial (surface) vein in the leg

Deep Vein Thrombosis (DVT)

- You have pain or a general ache, swelling, warmth or redness of your leg that is new
- Your feet feel numb or there is a tingling sensation
- The veins near the surface of your legs appear larger than normal or are more noticeable

If you have any of the above symptoms for ST or DVT please see your GP or come to the Emergency Department (A&E) for assessment and treatment as required.

Pulmonary Embolism (PE)

- Breathlessness
- Chest, back or rib pain which can be a sharp pain that gets worse when you breathe in deeply
- Coughing up blood
- Sudden collapse

If you have any of these symptoms go to your nearest Emergency Department (A&E) for immediate assessment and treatment as required or ring 999 as appropriate.

This content was adapted with permission from Sheffield Teaching Hospitals. (2022). Patient Information leaflet: Rivaroxaban to prevent blood clots for patients who have a lower limb plaster cast. Accessed from <https://www.sth.nhs.uk/patients/patient-information/find-a-leaflet/search-for-a-leaflet?s=blood+clots>

George Eliot Hospital is a smoke free environment.
For help and advice to stop smoking you can call the national helpline on 0300 123 1044 or visit <https://quit4good.warwickshire.gov.uk/>

The Trust has access to interpreting and translation services. If you need this information in another language or format please contact 024 7686 5550 and we will do our best to meet your needs.



GEH 685, Version 1, Review Date June 2026.