What should I look out for?

The symptoms of a DVT are as follows:

- Pain, swelling or tenderness in your leg (particularly if the swelling is above the knee or separate from the site of your injury).
- A heavy aching or cramping pain in the affected leg, especially when moving.
- Skin that becomes red or is warm to touch.

The symptoms of PE are as follows:

- Chest pain made worse by deep breathing.
- Fast breathing.
- Fast pulse rate.
- Shortness of breath, even at rest
- Coughing up blood or a continual dry cough.

If you are concerned you may have developed a clot (DVT or PE), seek urgent medical advice from your GP or go to your nearest Emergency Department, as diagnosis and treatment may be required. For further urgent advice please contact 111 or contact Fracture Clinic on 0207 288 5659.

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Prevention of blood clots from lower limb immobilisation

Who is this leaflet for?

This leaflet is for patients who have a lower limb immobilised. It explains about the increased risk of blood clots associated with lower limb immobilisation, and what steps can be taken to reduce this risk.

Why am I at increased risk?

Blood clots or Venous Thromboembolism (VTE) are a possible complication of having a lower limb immobilised in a plaster cast or boot following a fracture or an injury. The increased risk of developing a Deep Vein Thrombosis (DVT) happens as a result of reduced blood flow within the affected limb. DVT can cause skin discoloration, skin ulcers and lead to long-term problems in the leg veins. If untreated, a DVT can travel in the body to the lungs where it becomes a Pulmonary Embolism (PE), which can lead to breathing problems and in rare cases be fatal.

If you have VTE risk factors, we may recommend that you receive a 'blood thinning' medicine called an anticoagulant to reduce your risk of developing VTE. Patients without additional risk factors do not require anticoagulation treatment.

What does preventive treatment involve?

Preventing DVT and PE involves taking anticoagulant medicine, which reduce the blood's ability to clot. A Low Molecular Weight Heparin (LMWH) is commonly given by a small injection in the tummy once a day at the same time. If you are advised to take LMWH it is very important that you don't run out of these injections and that you continue them regularly until you are told to stop by a doctor. You will be provided with a sharps bin to safely dispose of waste.

What can I do to help reduce my risk of developing blood clots?

- Stay well hydrated. Try to drink between 1.5-2 litres of fluid daily (unless told otherwise).

- Stop smoking (if you smoke). This will also help you heal.

- Talk to your GP if you are taking the contraceptive pill as these can increase the risk of VTE. You may be advised to stop taking this while immobilised and use alternate contraception.

- Perform the exercises described below. While you have to wear a cast or boot, any activity which promotes contraction of muscles and increases blood flow is helpful. Exercises that may help:

  - Wiggle your toes. Try to do this for at least 10 seconds at a time, as often as you can.
  - If your ankle is not immobilised and you are able to do so, move your ankle up and down. Repeat 10 times and perform regularly.
  - For below knee casts only – regularly bend your knee, and then straighten (if you are able). Perform regularly.
  - If you need to travel on a long journey, try to move your legs regularly. Take regular breaks and walk around every 1 to 2 hours.