

VTE In pregnancy



VTE is an acronym that stands for ‘venous thromboembolism’. It is a blood clot that develops in the veins which carry blood back to the heart.

Most cases of VTE begin in the vein of the leg, arm or groin, these are called deep vein thrombosis (DVT). Sometimes a clot in the vein can move to the lungs, this is called a pulmonary embolism (PE).

Is VTE serious?

VTE is a serious condition that should be examined as quickly as possible. If you are concerned that you might have VTE, contact your healthcare provider immediately. If you have VTE, you will usually require urgent care in a hospital. Pregnant women and women who have given birth recently have died from a VTE, even though it is rare.

How do you identify VTE?

Signs of a VTE in your arm or leg include pain, tenderness, swelling, redness or discolouration of the arm or leg. It may also feel warm when you touch it.

A VTE in your lungs causes sudden shortness of breath or difficulty in breathing, pain or discomfort in your chest, a very fast or irregular heartbeat and coughing up of blood.

Who is more likely to have VTE?

If you are pregnant or have recently had a baby, you are more likely to have a VTE by 4 to 5 times in comparison to women who have not experienced pregnancy. It can happen any time during a pregnancy, but the risk is higher in the first 6 weeks after birth.

Your chance of VTE is higher before pregnancy if you:

- have had a VTE before
- have a mother, father, brother or sister who has had a VTE
- have a medical condition (e.g. thrombophilia, heart disease, lung disease or arthritis)
- are over 35 years of age
- have already had three or more babies
- are overweight (BMI over 30)
- smoke cigarettes
- have bad varicose veins

Your chance of VTE is higher during pregnancy and/or after birth if you:

- have a caesarean section birth
- have a long or difficult labour and birth
- can't move around as much (e.g. during long distance travel or if you are unwell in hospital)

- develop high blood pressure
- are having more than one baby (e.g. twins)
- lose a lot of blood or need a blood transfusion
- have your baby early (preterm)

Your healthcare provider will inspect and assess your risk early in pregnancy and again once your baby is born. You will also need to be checked if you become sick or are admitted to a hospital.

Can a VTE be prevented?

Your Healthcare Provider might ask you to:

- wear special firm-fitting stockings
- have regular injections of a blood thinning medication (e.g. clexane)
- while in bed in hospital, wear special sleeves or cuffs around your legs. These automatically inflate and deflate with air. This improves blood flow in your legs and helps prevent a VTE
- avoid deep tissue massage of your legs or arms

To help prevent a DVT:

- maintain a healthy weight and lifestyle
- quit smoking
- stay active
- move around or exercise your legs every 1–2 hours if you sit for long periods
- talk to your doctor If you are planning travel of 4 hours or more
- drink enough fluids to avoid dehydration (about 2 litres per day while pregnant and more if breastfeeding)

Get in contact with the Birth Unit

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