

References

If you require a full list of references for this leaflet please email patient.information@ulh.nhs.uk

The Trust endeavours to ensure that the information given here is accurate and impartial.



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United Lincolnshire Hospitals 
NHS Trust

Venous Thromboembolism and Long-Distance Travel Information for Patients

www.ulh.nhs.uk

What is Venous Thromboembolism?

All forms of long-distance travel involving a journey of more than four hours can increase your risk of developing blood clots. Deep vein thrombosis (DVT) combined with a pulmonary embolus (PE) or other types of blood clot are often referred to as venous thromboembolism (VTE). Your risk of developing VTE after a long-distance travel of more than 3 hours is quite low (about one in 4,565). This may be higher if you have other risk factors.

Am I at risk of venous thromboembolism if I travel long distance?

Most people who develop blood clots when they travel have additional risk factors. You may be at greater risk if you have had:

- A previous DVT or PE.
- Surgery lasting for more than 30 minutes under general anaesthetic in the past four to twelve weeks.
- A total knee or hip replacement in the past three months.
- A family history of thrombosis.
- Very tall.
- Hypercoagulable blood disorders, e.g. thrombophilia.

Is my risk higher if I am already on treatment for DVT/PE?

Your risk of further blood clots while travelling is low if you are on blood thinning (anticoagulant) treatment for DVT/PE. If you are planning to travel within two weeks of starting anticoagulants, please ask the DVT nurse or haematology doctor for more advice.

Notes

Further Information

Department of Health

http://www.dh.uk/en/PublicHealth/HealthProtection/Bloodsafety/DVT/DH_4123480

King's Thrombosis Centre

www.kingsthrbosiscentre.org.uk

Patient UK

<http://www.patient.co.uk/doctor/Prevention-of-Deep-Vein-Thrombosis.htm>

Life Blood—Thrombosis Charity, <http://www.thombosis-charity.org.uk>

Your risk of DVT/PE is higher if you:

- Are pregnant or gave birth less than six weeks before travelling.
- Take the combined oral contraceptive pill (COCP).
- Take hormone replacement therapy (HRT).
- Have cancer or are receiving treatment for cancer.
- Have heart failure or circulation problems.
- Have a plaster cast on your leg.

How can I reduce my risk of a DVT/PE?

Your risk is low if you do not have any of the risk factors listed. To reduce it further, while travelling we advise you to:

- Get comfortable and recline the seat as much as possible.
- Wear loose-fitting clothing.
- Store hand luggage in the boot/overhead lockers to keep the room in front of your feet free.
- While seated, bend and straighten the legs, feet and toes every half-hour or so during the flight.
- Press the balls of the feet down hard against the floor or footrest to increase the blood flow in the legs and reduce clotting.

- Do upper body and breathing exercises to improve circulation further.
- Take occasional short walks for journeys of three hours or more around the cabin, whilst the aircraft is cruising at altitude.
- Take advantage of refuelling stopovers where it may be possible to get out and walk about.
- Drink a reasonable amount of water.
- Avoid alcohol, which in excess leads to dehydration and immobility.
- Avoid taking sleeping pills, which can result in you sleeping in an awkward, immobile position.

If you have any of the risk factors listed, please follow the advice above. You should discuss them with your haematology doctor, consultant, GP or nurse, who may also suggest you:

- Delay your journey if you have recently had surgery.
- Wear travel compression socks.
- Split your plaster.
- Have blood thinning injections (heparin) on the day of the journey.

Will aspirin cut my risk of developing DVT/PE?

No. Studies have shown that aspirin is not useful in preventing DVT/PE and can actually cause serious side effects.

How will I know if I have a DVT?

You may notice swelling, redness, pain or tenderness in your leg, usually below the knee. This is different from mild ankle swelling which many people experience following a long distance flight or journey. Symptoms of a DVT will usually only affect one leg.

You may notice these signs hours or days (up to 8 weeks) after the travel, but occasionally signs can occur during the journey. You may develop signs of a PE without any problems in the leg, however, this is very rare. PE can cause shortness of breath, chest pain and if severe, dizziness and collapse. Both DVT and PE are serious conditions which require urgent assessment and treatment.

What should I do if I develop signs of a DVT/PE?

If you experience any of the above symptoms, you should seek advice urgently from a local doctor or the nearest Emergency Department.

Where can I get more information about flights, long distance travel and VTE?

You can get more information about in-flight exercises from your travel agent, the airline, the airline magazine and in-flight videos on many airlines.

You should always contact your travel insurance company explaining your risks before travelling or they may not cover you should anything happen.