

# Clot Prevention

Information for women taking Low Molecular  
Weight Heparin (LMWH)

Maternity and Obstetrics Service



This leaflet is for women who have been advised to take low molecular weight heparin (LMWH, also called Clexane®) during or just after their pregnancy to help prevent a clot.

### **Why have you been prescribed Clexane®?**

When you are pregnant your blood becomes more sticky; this means it can clot more easily. If you have other risk factors such as being overweight, are a smoker, or have a family history of blood clots, you might be at risk of developing a clot in your leg (known as a deep vein thrombosis or DVT) or in your lung (pulmonary embolism or PE).

Clexane® thins your blood and reduces the risk of you developing a clot. Your doctors have assessed you and you have been advised to take Clexane® before and possibly after your baby is born. This is because the risk of developing a clot starts early in the pregnancy and is highest after the baby is born.

**You must complete this course of Clexane® even if you are discharged from the hospital.**

### **Symptoms and signs to look out for**

- Pain, swelling and tenderness in your calf and/or thigh may be signs of a deep vein thrombosis.
- Chest pain, breathlessness, coughing blood and/or if you collapse may be signs of a pulmonary embolism.

### **How do I take Clexane®?**

Clexane® is given as an injection. You will be shown how to give yourself the injections before you go home and this leaflet also gives you instructions. **The best places for you to inject into are:**

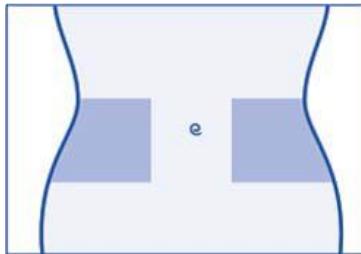
- The U-shape area around your belly button. It is safe to inject Clexane® into the abdomen while pregnant.

- The upper outer side of the thigh
- The upper outer part of the buttock (bottom cheek).
- If you have had surgery (such as a caesarean section), avoid injecting too close to the wound or bandages.

## How do I give myself the Clexane® injection?

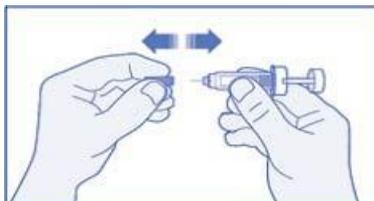
### Step 1

Wash your hands and make sure the area you are going to inject is clean before you begin. **Be sure to use a different area (site) to inject into each day to help prevent bruising.**



### Step 2

Open the pack and remove the syringe. Be sure the medicine is clear and has nothing floating in it. If you see anything in the medicine, talk to your doctor or midwife. Carefully remove the protective cap from the end of the syringe taking care not to bend the needle.



### Step 3

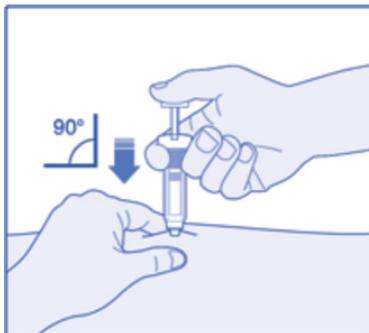
You need to make sure that you inject Clexane® into fatty tissue. This is the layer of fat underneath your skin. To do this, pinch a fold of skin between the thumb and fingers of one hand.

- If you are going to inject into your abdomen (U-shape area around your belly button) it is best to do this while sitting.
- If you are using your outer thigh it is best to do this when sitting or lying down.
- If you decide to inject into your one of the cheeks on your bottom (buttock) you may not need to pinch any skin as there should already be enough of a layer of fatty tissue.

**Clexane® must not be injected into the muscle as it will not be absorbed properly.**

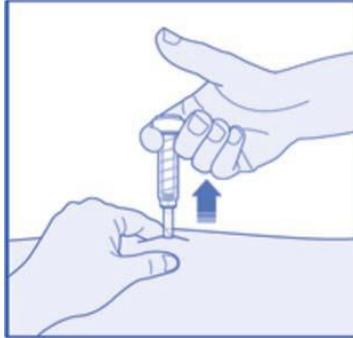
### Step 4

Hold the syringe with your other hand. Insert the whole needle into the fold of skin at a 90 degree angle (a right angle, see image below). Then slowly press the plunger down until the full dose of Clexane® has been given.



## Step 5

Remove the needle while letting go of the fold of skin. Dispose of the syringe in the yellow 'sharps' box you have been given. This box should be stored away from children. If you do not have a 'sharps' box or need a new one please contact your midwife or GP.



## Side effects of Clexane®

Clexane®, like all medications, may have side effects. The most common ones are swelling, bruising and/or an occasional droplet of blood at the site of the injection after you remove the needle. It is best to avoid rubbing the skin where the injection has been given afterwards as this can make the skin more likely to bruise.

If you have any concerns about the potential side effects, please discuss with your doctor or midwife.

## Frequently asked questions

### What can I do to reduce the risk of getting a clot?

It is important to keep moving around and well hydrated. Avoid sitting down for long periods of time.

### Is it safe to take Clexane® during pregnancy?

**Yes.** Clexane® does not cross the placenta to the baby. Many studies have shown that there is no increased risk to the baby in women taking Clexane®. However, if you start Clexane® during pregnancy you may need an anaesthetic referral to discuss epidural options during labour.

### Is it safe to breastfeed while taking Clexane®?

**Yes.** Only a very low level of Clexane® is secreted into the breast milk. This level is so low that your baby will not be affected.

### Does Clexane® affect other medications I might be taking?

Clexane® can affect other medications so it is important to tell your doctor and pharmacist all the medications you are taking.

### Can I travel while taking Clexane®?

If you need to travel by plane or for a long distance, make sure that you drink plenty of water and walk around for a few minutes every hour. You should also wear elasticated support stockings throughout your journey. Make sure you have enough injections for the time you are away and know where the nearest Accident and Emergency Department is, should you need medical attention. You will need a letter from your doctor to explain that you need to take your injections onto the plane.

## How should I store Clexane®?

Keep the syringes in the pack until it is time to use them. Store at room temperature and do not store above 25°C. Do not put Clexane® in the fridge or freezer. **Keep Clexane® where children cannot reach it.**

## Can I start taking the contraceptive pill while taking Clexane®?

Yes, there is no interaction between any of the contraceptive pills, injections or implants and Clexane®. However if you have had a clot detected then you must check with your doctor before starting any of the above.

## What do I do if I miss an injection?

You should have your injection as soon as possible and then take another injection 24 hours later.

## What do I do if I think I am going into labour?

If you are due for your Clexane® injection and you are having regular painful contractions you should **not** take your injection. You should call the Delivery Suite and explain that you are taking Clexane®.

## Who can I contact if I have any questions?

If you are concerned in anyway about using Clexane® injections you can contact either your community midwife or GP, or telephone the Maternity Helpline on 020 8510 5955 (everyday from 10am to 6pm)

If you have any symptoms of a DVT or PE, please seek medical attention straight away at your local Accident and Emergency Department or Delivery Suite.

Acknowledgement: Content adapted from Clot Prevention: information for women taking LMWH (Low Molecular Weight Heparin)' with the kind permission of Oxford University Hospitals NHS Trust.

With thanks to SANOFI for images used, taken from Clexane® syringes patient information leaflet, see: [www.medicines.org.uk/emc/files/pil.4499.pdf](http://www.medicines.org.uk/emc/files/pil.4499.pdf)

The images are taken directly from SANOFI licensed literature at the time of writing this leaflet, for the most up to date images and administration advise please see the SANOFI patient information leaflet found: [www.medicines.org.uk](http://www.medicines.org.uk)

### **Patient Advice and Liaison Service (PALS)**

PALS can provide information and support to patients and carers and will listen to your concerns, suggestions or queries. The service is available between 9am and 5pm.

 (Telephone) 020 8510 7315

 (Textphone) 07584 445 400

 (Email) [huh-tr.pals.service@nhs.net](mailto:huh-tr.pals.service@nhs.net)

If you want this information in large print, easy read, plain text, audio or braille please contact Patient Information on 020 8510 5302 or email: [huh-tr.patientinformation@nhs.net](mailto:huh-tr.patientinformation@nhs.net)  
This information may also be available in other languages.

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