

Information for patients and carers

Pulmonary Embolism

A decorative graphic at the bottom of the page consisting of three overlapping, wavy bands of blue. The top band is a light blue, the middle is a medium blue, and the bottom is a dark blue.

This leaflet provides information for people under investigation or found to have a pulmonary embolism.

What is a Pulmonary Embolism?

A pulmonary embolism is a blood clot in the vessels in your lung. This blood clot stops the blood flow within an artery in the lung. In most cases the source of this, is a blood clot forming in a deep vein of the leg. In some cases, it can form in another part of the body, which is rare.

What causes a Pulmonary Embolism?

Certain medical conditions increase the risk of a pulmonary embolism such as:

- Heart Failure
- Cancer
- Recent Surgery – Especially in Knee/Hip Surgery
- Disorders that affect clotting
- Coronavirus disease (COVID-19)

Risk factors that increase the risk of forming a blood clot are:

- Being overweight
- Smoking
- Pregnancy
- Oestrogen based contraception or hormone replacement therapy
- Extended periods of inactivity such as being on bed rest or long trips meaning you are sitting for long periods of time

How is the Pulmonary Embolism diagnosed?

You would likely have attended for a Computerised Tomography (CT) scan or alternatively a Ventilation-Perfusion (VQ) scan which confirmed the presence of a blood clot within the vessels of your lungs.

A Computerised Tomography (CT) scan or alternatively a Ventilation-Perfusion (VQ) scan will have confirmed the presence of a blood clot within the vessels of your lungs.

What are the symptoms of a Pulmonary Embolism?

It is important you are aware of the symptoms of a pulmonary embolism as they can vary between people and be difficult to recognise. These are the main symptoms:

- Sudden onset shortness of breath
- Chest pain
- Coughing, including coughing up blood
- Feeling faint or dizzy
- Loss of consciousness/collapse

Other possible warning signs may be a red, painful swollen leg as a blood clot in your leg can break off and travel to your lungs.

If you, or someone you care for has a combination of these symptoms do not delay call 999 for an ambulance.

What is the treatment for a Pulmonary Embolism?

The hospital will prescribe a blood thinning medication called an anticoagulant. It is designed to prevent the existing clot from growing bigger and the formation of new clots while your body naturally breaks down the existing clot. An anticoagulant injection called low molecular weight heparin may be administered initially for 5 days then changed to an oral anticoagulant like:

- Warfarin
- Dabigatran
- Rivaroxaban
- Apixaban
- Or you may be discharged on low molecular weight heparin

If you are prescribed an anticoagulant, it is recommended you take it for at least 3-6 months, for some people this may be longer. In severe cases of pulmonary embolism other treatment may be needed to break up or remove the clot. These medications are called thrombolytics. This will be discussed and decided with your clinician based on your condition.

What are the side effects for anticoagulants?

All medication has risks and benefits which will be discussed with you by your clinician before being prescribed.

Be aware that you may bleed more easily and excessively. This apart, side effects from anticoagulants will vary from person to person.

If you are on warfarin, you may require regular blood tests to ensure you receive the correct dose. Other medications, alcohol, certain foods and herbal remedies can reduce the effectiveness of anticoagulants, so speak with your doctor, nurse & pharmacist to help you manage these.

Prevention

There are a number of ways you can help prevent pulmonary embolisms:

- Keep active – If you are taking a long journey or long-haul flight have regular breaks in which you do leg stretching exercises. Take deep breaths, stand up and walk around, keep well hydrated, wear compression stockings and avoid alcoholic drinks. Consult your health care professional before traveling long distances
- Post-surgery – Do leg exercises and move around as soon as you can
- Take anticoagulation medication as prescribed by your health care professional. If recommended by your health care professional wear compression stockings as these encourage quicker blood flow around your body by being tightly fitted around your lower legs

Lifestyle changes can reduce the risks of pulmonary embolism:

- Not smoking – help and support is available to help you quit smoking and can be discussed with health care professionals or you can self-refer for support (please see sources of further information)
- Keeping a healthy weight
- Eating plenty of fresh fruit and vegetables and having a health balanced diet
- Getting regular exercise – recommendations are at least 150 minutes a week

Contact details

Respiratory secretaries are available on telephone number: **01772 523093**.

Sources of further information

www.lancsteachinghospitals.nhs.uk

www.nhs.uk

www.accessable.co.uk

www.patient.co.uk

<https://tinyurl.com/yc6356cd>

Follow us on social media @lancshospitals

Lancashire Teaching Hospitals NHS Foundation Trust is not responsible for the content of external internet sites.

All our patient information leaflets are available on our website for patients to access and download:

www.lancsteachinghospitals.nhs.uk/patient-information-leaflets

Lancashire Teaching Hospitals is a smoke-free site. Smoking is not permitted anywhere on any of our premises, either inside or outside the buildings. Our staff will ask you about your smoking status when you come to hospital and will offer you support and advice about stopping smoking this will include Nicotine Replacement Therapy to help manage your symptoms of withdrawal and the opportunity to speak to a nurse or advisor from the specialist Tobacco and Alcohol Care Team.

If you want to stop smoking, you can also contact Smokefree Lancashire on Freephone **08081962638**.

**Please ask a member of staff if you would like help in understanding this information.
This information can be made available in large print, audio, Braille and in other languages.**

Department: Respiratory Department

Division: Specialist Medicine

Production date: August 2024

Review date: August 2027

JR 1175 v1