

Special considerations

People who have had a thrombosis in the past and now think that they could have other risk factors that increase their risk of another thrombosis should discuss with their doctor whether they think LMWH is indicated.

Any person who has recently had a DVT/PE diagnosed and is taking anticoagulant therapy should seek advice from their doctor if they are planning long distance travel within 2 weeks of diagnosis.

Final suggestions

The risk of developing travel related DVT or PE is very small. Following these suggestions may minimise the risk.

Anyone who develops pain or swelling in their legs, chest pain and/or shortness of breath after a long journey should seek medical advice.

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**Travel and Thrombosis
Information for Patients**

June 2006

What is Traveller's thrombosis?

The risk of blood clots triggered by travel and thrombosis has been given several different names over the last few years. It is now described as traveller's thrombosis instead of economy class syndrome. Thrombosis as a result of prolonged immobility also occurs in association with long distance car rides, bus, rail and air travel. The longer the length of travel, the greater the risk.

In 2000, the House of Lords Science and technology committee called for action on air travel and health after increasing public concern about the effects of air travel, particularly in relation to thrombosis. There are no published evidence based guidelines and this leaflet is intended as a source of information only.

Common sense measures for ALL travellers

- Do not sit for long periods, especially with pressure on the back of your thighs. Therefore avoid crossing your legs when sitting and change position frequently. Avoid sleeping tablets as they may lead to prolonged periods of immobilisation.
- Regularly flex your ankles contract your calf muscles.
- Maintain hydration by drinking plenty of water and soft drinks. Avoid alcohol and excess caffeine. Remember that air conditioning, excess heat, diarrhoea, vomiting and inadequate fluid intake can all cause dehydration.
- When travelling wear comfortable clothes and shoes.

Low to medium risk group

This group may include people who:

- a) Have had a DVT (deep vein thrombosis) or PE (pulmonary embolism) in the past.
- b) Have had surgery under a general anaesthetic lasting for more than 30 minutes in the previous 2 months, but not within the last 4 weeks
- c) Are obese
- d) Have varicose veins
- e) Are pregnant or who have had a baby within the last 2 months
- f) Have lower limb paralysis or who have had lower limb trauma within the last 6 weeks.
- g) Have a malignancy

These people may consider:

- Following the common sense measures
- Wearing compression stockings (travel socks). It is best to use travel socks that extend over the knee as they do not constrict the blood flow behind the knee.

The high risk group

This group may include people who:

- a) Have had surgery under a general anaesthetic lasting more than 30 minutes in the last 4 weeks.
- b) Have a known thrombophilia (tendency to clot) and a past history of thrombosis
- c) Have a plaster cast on a lower limb

These people may consider:

- Following the low to medium risk measures
- Asking their doctor whether they should have a low molecular weight heparin (LMWH) for self administration 1 or 2 hours before travelling.