Rivaroxaban to prevent blood clots for patients who have a lower limb plaster cast

Information for patients
Pharmacy
Your doctor has prescribed a tablet called rivaroxaban. This leaflet tells you about rivaroxaban, what it is for and how to use it.

We must seek your consent for any procedure or treatment beforehand. Staff will explain the risks, benefits and alternatives where relevant before they ask for your consent. If you are unsure about any aspect of the procedure or treatment proposed, please do not hesitate to ask for more information.

**What is rivaroxaban and what does it do?**

Rivaroxaban is used to prevent blood clots such as deep vein thrombosis or pulmonary embolism. It is an anticoagulant; this means that it thins the blood.

**Why does blood clot?**

When we cut ourselves, we bleed. To stop us from bleeding too much, chemicals in our bloodstream help to form a clot. Sometimes a clot can form in the wrong place.

People who are ill, have had surgery, or cannot move around as much as normal, are at increased risk of blood clots forming in the wrong place.

**What happens if a blood clot forms in the wrong place?**

A deep vein thrombosis (DVT) is a blood clot in the veins, usually in the leg. This blocks the flow of blood around the body. The symptoms usually only affect one leg and include pain, redness and swelling. The problems that can last a long time after someone has a DVT include having a painful swollen leg, leg ulcers and mottling of the skin.

A pulmonary embolism (PE) is a piece of blood clot that has broken off and travelled to the lungs. It causes chest pain and serious breathing
problems. Pulmonary embolism causes lasting lung damage and death in a small number of people.

**Who gets blood clots?**

Anyone can get a DVT or PE but some people are at a higher risk. You are at increased risk of blood clots if:

- you or a close relative has had one before
- you are very overweight
- you are over 60 years old
- you take certain medications, including the combined oral contraceptive pill ("the pill") or use a contraceptive patch, or hormone replacement therapy (HRT)
- you are dehydrated
- you have recently been on a long journey (more than 4 hours long)
- you have cancer, heart disease or lung disease
- you have thrombophilia (a blood disorder)
- you have a severe infection
- you have varicose veins
- you are pregnant or have had a baby in the last 6 weeks
- you cannot move around as much as normal, for example because your leg is in a plaster cast

**Why has rivaroxaban been prescribed for me?**

You have been prescribed rivaroxaban because your risk of having a blood clot is higher than usual. This is because you have your leg in plaster and you have at least one of the risks listed. Taking rivaroxaban will reduce the chances of you getting a blood clot.
Are there any side effects?

Because rivaroxaban thins your blood, it can make you bleed more easily. If you are at risk of bleeding problems your doctor may decide not to prescribe this medication.

You should also read the information leaflet in the packet as it will tell you more about the side effects of rivaroxaban.

Is there anything I should look out for when I'm taking rivaroxaban?

Whilst you are taking rivaroxaban tablets you must go to hospital straight away if you notice:

- you are bleeding a lot from a wound
- you have swelling around your wound or anywhere else
- you have a sudden very bad headache
- you have tenderness or swelling in your stomach

You should tell a nurse or doctor as soon as possible if you notice:

- you are bruising more easily than you normally do
- you feel more weak, tired or short of breath than normal

What else should I know about rivaroxaban?

Rivaroxaban has not been approved to prevent blood clots in people with plaster casts but it has been approved to prevent blood clots in other patients, for example after hip or knee replacement surgery and those who have an irregular heart beat.

You may hear this called "off label" or "unlicensed" use of rivaroxaban. At this hospital senior doctors and pharmacists have decided that it is
safe to use rivaroxaban in this way. You can ask your doctor or nurse for a copy of Sheffield Teaching Hospitals' 'Unlicensed and off licence medicines' information leaflet to explain more. If you are unhappy with taking rivaroxaban talk to your doctor, nurse or pharmacist. There are other medicines that could be used (such as heparin injections).

You must not take rivaroxaban if you are pregnant or have severe problems with your kidneys. There are other medicines that should be used instead (such as heparin injections).

**What will happen if I don't take rivaroxaban?**

If you do not take rivaroxaban then there will be more chance that you get a blood clot while your leg is in a plaster cast. Using rivaroxaban is not guaranteed to stop you getting a blood clot.

**How much rivaroxaban should I take?**

Rivaroxaban comes as 10mg tablets. You should take one tablet each day, usually in the evening.

You should carry on taking the tablets until your plaster cast has been removed, unless a doctor tells you to stop. The hospital doctor will prescribe enough tablets to complete your course of treatment.

**What should I do if I take more rivaroxaban than I should?**

If you have more than one dose in a day, then you should tell your doctor.
What should I do if I forget to take my medication?

If you remember the same day, then take the dose. If you remember the next day, then take your dose when it is next due. Do not take more than one dose a day.

Do I need to tell you about other medication I am taking?

Please tell your doctor if you are taking any other medicines, including any medicines that you have bought without a prescription.

How should I store this medicine?

Store the tablets in a cool dry place (not in the fridge). Keep them away from children and animals.

Where can I find out more information?

You will find more information in the package leaflet in the box of rivaroxaban tablets.

Can I do anything else to reduce my risk of blood clots?

You can help reduce your risk of getting a clot by:

- drinking plenty of water or other non-alcoholic drinks to keep hydrated
- moving around as much as you can (if you are not sure how much you can do, then talk to your nurse, doctor or physiotherapist)
- carrying out the following leg exercises with your good leg (even if you are in bed):
Who can I contact if I have any questions?

If you attended an outpatient clinic you can telephone the Plaster Room on **0114 271 4058**. If you have been an inpatient you can contact the ward you stayed on.

The Pharmacy Medicines Helpline can answer questions about the medicines you have been given from the hospital. Their number is: **0114 271 4371**.

If you have any pain or swelling in one or both legs, you should go to Accident and Emergency (A&E).

If you suffer any shortness of breath, chest pain or coughing up blood, you must go to A&E straight away, or call 999 immediately.