

During pregnancy, some women are at risk of developing clots in their:

- legs (this is known as deep vein thrombosis or DVT) or
- in their lungs (this is known as pulmonary embolism or PE)

If this is the case they may need to take medicines to 'thin their blood'. These medicines include injections of low molecular weight heparin (LMWH) called **enoxaparin** (also called clexane), **dalteparin** or **fondaparinux** injections.

**It is important for the doctors and midwives on the labour ward to know:**

- if you are taking these medicines
- when you last took them, and
- how much you took

If you are taking these injections, a certain amount of time needs to pass before you can have either epidural analgesia (pain relief) or spinal anaesthesia (used for caesarean section and other operations). This is because of a rare but serious complication called an epidural haematoma (which is a collection of blood that presses on the spinal cord or the nerves near the spinal cord) that can occur when taking blood thinning medications.

**For example:**

- If you take a prophylactic (preventative) dose of LMWH once a day, 12 hours needs to pass before you can have a spinal or epidural injection.
- If you take medication twice a day (treatment regime), 24 hours needs to pass.
- Some medicines such as fondaparinux require even longer.

## What does this mean for me?

If you think you are in labour, do not take your next dose of medicine and contact the maternity assessment for advice.

If you are having an elective c-section, a health care professional e.g. a doctor or midwife, will discuss the timing of your medication with you.

## What if I have taken today's dose of medicine and go into labour?

There are other pain relief options available for you – these start with entonox (gas and air), TENS machines and diamorphine injections (strong painkiller). Depending on the availability, there is also remifentanil, a strong painkiller, given via a patient controlled analgesia pump (see remifentanil PCA leaflet).

## What if I have taken today's dose of medicine and need a caesarean section urgently?

The anaesthetic doctor will talk to you about the safest type of anaesthetic for you. This may be a general anaesthetic where you will be asleep during the operation or a spinal anaesthetic injection where you are numb and pain free but awake.

## Further Information

If you have any questions please speak to your midwife or obstetrician at your next appointment. You can also ask for an appointment at the anaesthetic clinic.

The contact numbers for: OPD QEUH 0141 201 2226  
OPD PRM 0141 211 5233  
OPD RAH 0141 314 7617