

# Superficial Thrombophlebitis

Information for patients



## What is superficial thrombophlebitis?

Superficial thrombophlebitis occurs when a surface vein becomes inflamed or irritated and causes blood clotting within that vein. It can also be called “superficial vein thrombosis”. The tissues overlying the vein become inflamed.

The term “superficial” means it occurs in the veins near the surface of the skin so it is not the same as a deep vein thrombosis (DVT). It most commonly occurs in the legs, especially in varicose veins, but can occur in other areas, including arms.

## What are the symptoms?

Symptoms of superficial thrombophlebitis include:

- Pain in the leg around the vein that is affected
- The affected vein may become lumpy and hard to touch
- Redness of the skin around the vein. This redness may start to move up the leg
- The area is very tender when it is touched, even by bed sheets or clothes
- The leg may swell
- Occasionally, people can feel unwell or have a fever.

## What causes superficial thrombophlebitis?

The following are reasons why people may develop superficial thrombophlebitis:

- Varicose veins: This is the most common reason why superficial thrombophlebitis occurs. The veins are often wider than normal with more twists and turns in them and blood can gather in these widened areas, becoming inflamed and then clot
- Veins which may have had previous damage, such as a blood clot in the deep veins, or previous superficial thrombophlebitis
- Smoking
- Being overweight
- Not moving around as much as usual, e.g. long flights, after surgery or during illness, or having a plaster cast on your lower leg
- Taking the oral contraceptive pill or hormone replacement therapy (HRT)
- Pregnancy
- Cancer
- In the arm veins, if you have had an injection or cannula in the vein recently
- Injecting intravenous drugs.

## What are the risks of superficial thrombophlebitis?

Although the area of inflammation and blood clot may start as a small area, it can grow if left untreated. The superficial veins are part of a network of veins which join the deep veins of the leg, and so there is a chance that a clot in the superficial vein can expand into a deep vein. This is called a deep vein thrombosis (DVT) and is treated differently to superficial thrombophlebitis. This is more likely to happen if the thrombophlebitis is in the upper thigh or groin, or behind the knee (in places where superficial veins meet deeper veins).

It's also more likely to happen if:

- The affected vein is a normal vein rather than a varicose vein
- You have had a deep vein thrombosis before
- You are immobile.

The symptoms of deep vein thrombosis are: pain, swelling, or discolouration of the leg. If this happens you must seek medical attention immediately.

In addition, the deep veins are part of the system of blood vessels which moves blood from the legs towards the heart and lungs. Sometimes, blood clots which have formed in the deep veins of the leg can break off and become lodged in the lungs. This is called a pulmonary embolus (PE) and can be dangerous. Typical symptoms include chest pains, shortness of breath, coughing up blood and in more serious cases, faint spells, dizziness, and collapse.

Very occasionally, there can be infection associated with superficial thrombophlebitis, which may need treatment with oral or intravenous antibiotics.

After an episode of superficial thrombophlebitis, you may be left with a firm lump in your vein and some discolouration of the skin overlying the vein. The veins may not function as well as they used to, and may become varicose.

## How is it treated?

To help reduce any pain and swelling:

- Raise the leg to help reduce swelling
- Keep active to keep the blood circulating but do not over exert yourself – gentle walking is the exercise of choice
- Press a cold flannel over the vein to ease any pain
- You may be prescribed painkillers to help.

## Medication

Small areas of superficial thrombophlebitis may clear up without any treatment. However, depending on the size of the superficial thrombophlebitis and which veins it is affecting, you may be offered other treatments, such as anti-inflammatory treatments or anticoagulation medication, which some people prefer to call “blood thinners”.

This is explained further below.

It is important to remember that the treatment you receive will depend on your medical history, weight, current medication, and the blood tests you have had done when you were seen at the hospital.

- For small areas of thrombophlebitis which are further down the leg into the lower calf, you may receive treatment with anti-inflammatory gel or tablets and possibly a stocking.
- For larger areas of thrombophlebitis, you may receive daily blood thinning injections with a blood thinner called low molecular weight heparin to prevent the clot growing towards a deep vein. Typically, this is given for 4-6 weeks.
- If the thrombophlebitis is very near to a deep vein this means there is a high risk of it expanding into the deep vein and becoming a deep vein thrombosis. In this case, you may be offered 3 months of anticoagulation with tablets

If you are started on medication, you will be asked back for review at one week, and regular intervals thereafter to monitor your treatment.

## Anticoagulant medication

You may receive anticoagulation medication, which some people prefer to call “blood thinners”. There are different types of medications and the aim is to stop the blood clot growing, or travelling to the lungs. The medication does not dissolve the clot- it just keeps the blood thin to give your own body time to deal with it.

The options available will be discussed with you, with an explanation of which one may be best for you. You will be fully counselled regarding the medication and given information to take home.

It is very important that you take these medications exactly every day, in the way that has been explained to you. If you miss doses or take them incorrectly, you may increase your chance of the clot growing, or of bleeding, which is a risk with anticoagulant treatments.

## Is there anything I should/shouldn't do?

When you are on anticoagulants, it is important to realise there is a bleeding risk with each of the medications. You will be given a card to be kept on your person at all times stating which anticoagulant medication you are on. You should avoid:

- Any hobbies or activities which increase this bleeding risk, such as contact sports.
- Drinking excessive amounts of alcohol and using recreational drugs.

Taking aspirin and other anti-platelet medication (this may not apply to some patients with heart conditions, so please make sure this is discussed with the team looking after you) or anti-inflammatory drugs such as ibuprofen, naproxen, or diclofenac.

## What should I look out for?

Contact your GP or call 111 in the event of:

- Your stool turning black or fresh blood in your stool
- Visibly red/bloody or pink coloured urine
- Bleeding or bruising appearing without any injury
- Nosebleeds that last longer than 20 minutes (see NHS inform on how to stop a nosebleed) or bleeding from your gums.

**If you have a head injury you should always go to accident and emergency**

## What happens after treatment?

When the inflammation settles, you may be left with darkened skin over the area and the lumps may take several weeks to go down.

It may be recommended that you wear compression stockings to try and prevent a further episode of thrombophlebitis. These can be obtained from your GP.

In some cases where there has been more than one episode in varicose veins requiring treatment at hospital, consideration may be given to treatment of varicose veins. The team looking after you, or your GP, will decide if this is appropriate.

## How can I prevent it happening again?

- Keep a healthy weight
- Keep active
- Stop smoking
- Wear compression stockings, if these are recommended.

## Contact details

<input type="checkbox"/>	<b>Western General Hospital</b>	
	8am-8pm Same Day Emergency Care	<b>0131 537 2137</b>
	8pm-8am Medical Assessment Unit	<b>0131 537 1330</b>
<input type="checkbox"/>	<b>Royal Infirmary of Edinburgh</b>	
	Ambulatory Care	<b>0131 242 1422</b>
<input type="checkbox"/>	<b>St John's Hospital</b>	
	9am-5pm Same Day Emergency Care	<b>01506 523 203</b>
	5pm-9am Accident and Emergency	<b>01506 523 000</b>

## References:

NICE Clinical Knowledge Summary Superficial Thrombophlebitis:

Web reference: <https://cks.nice.org.uk/topics/superficial-vein-thrombosis-superficial-thrombophlebitis/>

