



# TREATING AND PREVENTING VENOUS THROMBOEMBOLISM

(pulmonary embolism or deep vein thrombosis)

For patients prescribed **LIXIANA**<sup>®</sup>  
(edoxaban)

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# UNDERSTANDING YOUR TREATMENT FOR VENOUS THROMBOEMBOLISM

Starting a new medication can be challenging and it is normal to feel overwhelmed with information at first. Whether you have recently come out of hospital after being treated for venous thromboembolism (deep vein thrombosis or pulmonary embolism) or are receiving treatment for prevention, this booklet will help you take the information on board. You can refer back to pages if you need to.

LIXIANA® has been designed to treat blood clots and prevent them from recurring, helping to treat blood clots you may have and protect you against potential clots in future.

You should always follow your doctor's advice because it is tailored for your needs. This booklet is intended to provide helpful reminders. It is not intended to replace your doctor's advice. If you have any concerns or questions about your health or your medication, your doctor is always the best person to ask.



# WHAT IS VENOUS THROMBOEMBOLISM?

A thrombus, otherwise called a 'blood clot', occurs when the normal clotting process is activated in an uninjured or slightly injured blood vessel. They normally form in the deep veins of the legs (deep vein thrombosis).

They can result in:

- 1) decreased blood flow through a large vessel,
- 2) total blockage of a small vessel, or
- 3) a thrombus can dislodge and float freely around the bloodstream (called an embolus).

**Venous thromboembolism (VTE) is a blood clot in a vein.<sup>1</sup>**

**The term covers two, related conditions:<sup>1</sup>**

- Deep vein thrombosis (DVT) (explained in more detail on page 6)
- Pulmonary embolism (PE), which may be a complication of DVT (explained in more detail on page 7)

VTE can be caused by long periods of inactivity (such as long-haul flights or being bedridden in hospital); blood vessel damage; pregnancy; or contraceptive therapy. It is also associated with some medical conditions, including cancer and rheumatoid arthritis. However, often the cause is unknown.<sup>1</sup>

**Burden of VTE in Europe<sup>2</sup>**

- Data suggests that VTE is the third most prevalent cardiovascular disease
- It has been estimated that the annual burden of fatal and non-fatal symptomatic VTE is 1.5 million events
- Around 60% of these VTE cases were hospital-acquired
- Approximately 10% of hospital deaths are attributed to PE, but in 70–80% of these cases a diagnosis of PE was not even considered prior to death

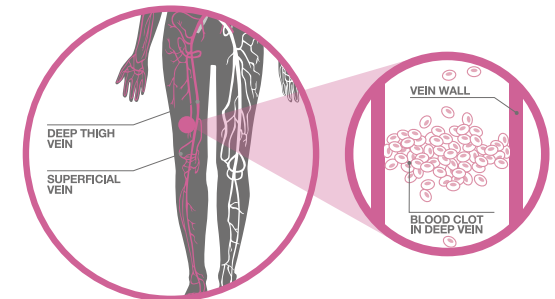
The total direct costs of all these VTE events are estimated at EUR 3.07 billion each year.

## WHAT MIGHT YOU EXPERIENCE WITH DEEP VEIN THROMBOSIS?

Deep vein thrombosis (DVT) occurs when a blood clot blocks one of the deep veins, usually in the legs.<sup>1</sup> You should see a doctor immediately if you experience DVT symptoms (listed below).

**Symptoms of DVT in your leg:<sup>4</sup>**

- Pain, swelling or tenderness (usually in your calf)
- A heavy ache in the affected area
- Warm skin around the area of the blood clot
- Red skin, particularly at the back of your leg below the knee



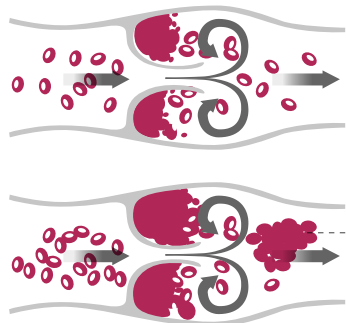


# WHAT MIGHT YOU EXPERIENCE WITH PULMONARY EMBOLISM?

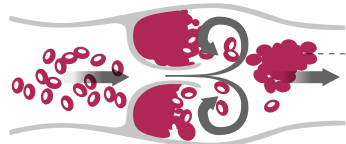
## DID YOU KNOW THAT DEEP VEIN THROMBOSIS CAN CAUSE BLOOD CLOTS ELSEWHERE?

Sometimes a fragment of blood clot breaks free and travels away via the bloodstream (an embolus). An embolism is the resulting blockage, which occurs when a fragment becomes lodged in blood vessels elsewhere.<sup>1</sup>

An embolism can get stuck in any small blood vessel. Common sites are in the legs or the lungs.<sup>3</sup>



Fragment of blood clot (embolus) travelling through vein



Blood clot (thrombus)

Part of a blood clot may detach and travel through your blood vessels. This is why it is important to treat and prevent blood clots.

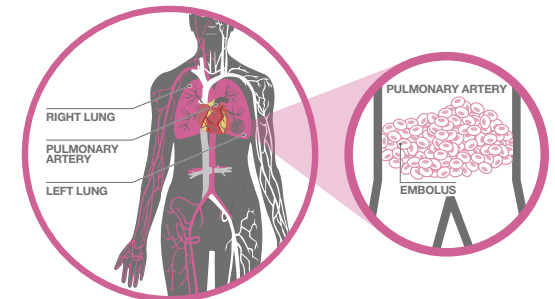
When a blood clot becomes lodged in blood vessels in the lungs it is called a pulmonary embolism (PE)<sup>1</sup>. A PE is a medical emergency requiring hospitalisation and you should see a doctor immediately if you experience symptoms (listed below).<sup>5</sup>

### Symptoms of PE in your lung:<sup>5</sup>

- Feeling short of breath, which may come on gradually or suddenly
- Pain in your chest or upper back, which may worsen when you breathe in
- Coughing (usually a dry cough) but you may cough up blood, or mucus that contains blood
- Feeling lightheaded, dizzy, faint, or suddenly collapsing

### Quick facts about PE:

- A PE can occur hours or days after a clot has formed<sup>2</sup>
- Sometimes there may also be signs of DVT in one of your legs, but there may be no obvious sign of DVT<sup>5</sup>
- It can be difficult to recognise the symptoms of PE, as they can be non-specific, so contact your doctor with any abnormal symptoms



# IS IT POSSIBLE FOR YOU TO GET ANOTHER VENOUS THROMBOEMBOLISM?

Take LIXIANA® every day, exactly as your doctor has prescribed, to treat blood clots and to reduce your risk of further clots.



If you have been diagnosed with a VTE before, you are more likely to experience VTE again than people who have never had one.

However, there are ways you can minimise your risk of experiencing another VTE. Over the next few pages you will find tips for prevention, as well as information about taking LIXIANA®, which has been designed to help prevent future VTE.

If you do have symptoms of deep vein thrombosis or pulmonary embolism (as described previously), make sure to remind your doctor that you have had this problem before.<sup>2</sup>

If you are admitted to hospital or attend an outpatient clinic for surgery or for illness, tell the doctors you have had VTE before.<sup>2</sup>

## BUT YOU CAN REDUCE YOUR RISK OF VENOUS THROMBOEMBOLISM

Maintaining a healthy lifestyle can help reduce your risk of VTE.

- **If you smoke, it is a good idea to stop**
  - Ask your doctor for help to quit smoking<sup>6,7</sup>
  - Smoking makes your arteries 'fur up', which makes a blood clot more likely<sup>6</sup>

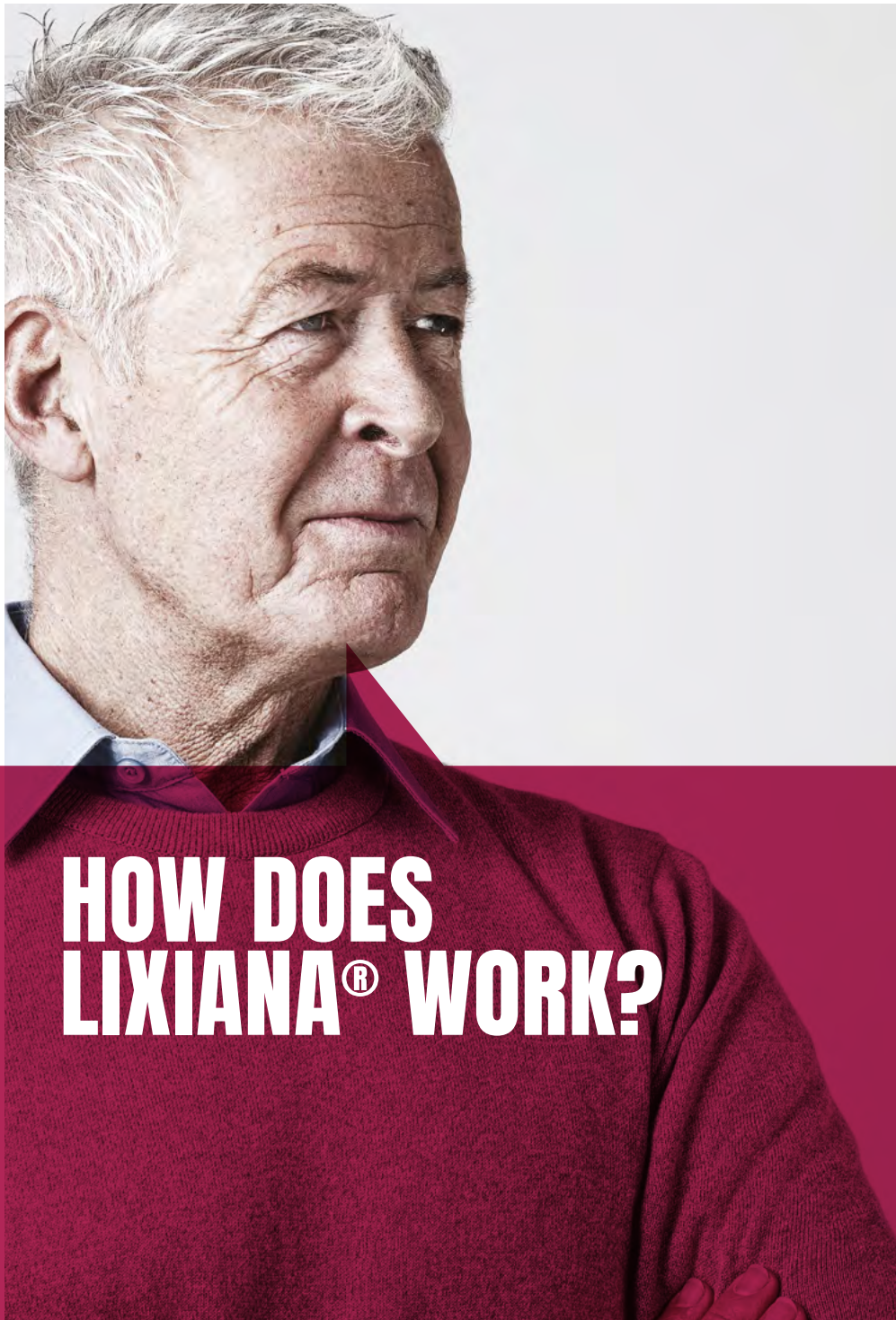
- **Eat a healthy, balanced diet<sup>7</sup>** avoiding high-fat foods and saturated fats<sup>6</sup>
  - Foods that are high in saturated fats can raise the amount of 'bad' cholesterol in your body, increasing your risk of developing a blood clot<sup>6</sup>
- **Maintain a healthy weight** or lose weight if you are obese<sup>7</sup>
- **Wear compression stockings** or socks when you fly and try to exercise your feet and lower legs using small movements while seated<sup>7</sup>

### Take regular exercise<sup>7</sup>

If you have had a DVT, your care team will usually advise regular walking exercise along with compression stockings.<sup>7</sup>

### Case Study: Why is exercise so important with VTE?<sup>8</sup>

- A study carried out on 8,000 people aged 18–70 compared the effects of regular exercise in people who had been diagnosed with a blood clot in their leg or lung with people who had never had a clot
- During the study, everyone was asked to exercise at least once a week – at whatever sport and intensity they wanted
- The result was that weekly exercise reduced the overall risk of VTE by 22% for men and 39% for women
- Therefore regular exercise is advisable in patients with VTE



## HOW DOES LIXIANA® WORK?

LIXIANA® is an “anticoagulant”. This means it reduces the ability of your blood to clot (thins your blood), which helps to prevent you from suffering dangerous blood clots and treats existing ones.<sup>10</sup>

LIXIANA® works by blocking a component in your blood called “factor Xa”, which plays an important role in the blood clotting process.<sup>10</sup> It prevents the creation of thrombin, which is needed to form a ‘thrombus’ or clot.<sup>10</sup>

LIXIANA® treats VTE and helps to prevent the buildup of further blood clots in the long term.<sup>9</sup> You should carry on taking LIXIANA® for as long as your doctor advises.

When you were first treated for VTE, you may have received heparin as quick-acting anticoagulant medication, through a drip or by injection.<sup>10</sup>

Your doctor has now decided to switch your anticoagulant medication to LIXIANA®. It is a once-daily oral tablet, so it is easy to take at home.<sup>9</sup>

## HOW SHOULD YOU TAKE LIXIANA®?

- You should have been told to take LIXIANA® once per day:<sup>9</sup>
- The recommended dose is one 60 mg tablet once per day<sup>9</sup>
- In certain circumstances (if you have impaired kidney function, low bodyweight or are taking medication called P-gp inhibitors), your doctor may have reduced your dose to one 30 mg tablet once per day<sup>9</sup>

## HOW TO TAKE LIXIANA®

- Swallow the tablet, preferably with water<sup>9</sup>
- LIXIANA® can be taken with or without food<sup>9</sup>

## WHAT IF YOU FORGET TO TAKE LIXIANA®?

- If you remember on the same day: Take the tablet immediately and then continue the following day with the once-daily tablet intake as usual<sup>9</sup>
- If you remember the next day or later: Take your usual dose for that day.<sup>9</sup> NEVER double the prescribed dose in a single day. It is very important to take the tablets exactly as directed. Never take larger or more frequent doses.

You should check with your doctor or pharmacist if you have any questions about your treatment.



## WHAT ABOUT THE POTENTIAL SIDE EFFECTS?

Like all medication, LIXIANA<sup>®</sup> can cause side effects, although not everybody experiences them.<sup>9</sup> Like other anticoagulant medication, LIXIANA<sup>®</sup> is designed to thin your blood and help prevent blood clots. So you may have an increased risk of bleeding while taking it. Speak to your doctor immediately if you experience:

### Visible bleeds such as:<sup>13</sup>

- Nose bleed
- Red or dark brown urine
- Prolonged bleeding from a cut
- Red or black stools
- Bleeding gums
- Bleeding that does not stop by itself
- Abnormally heavy periods if you are a woman

### Possible signs of internal bleeding even though you can't see any blood:<sup>9</sup>

- Exceptional weakness
- Tiredness
- Paleness
- Dizziness
- Headaches
- Unexplained swelling

If you experience any side effects, talk to your doctor or pharmacist. It is important not to stop taking LIXIANA<sup>®</sup> without talking to them first.



**IS THERE ANYTHING  
ELSE YOU SHOULD  
CONSIDER WHEN  
TAKING LIXIANA®?**

Like all anticoagulant medication, there may be an increased risk of bleeding while taking LIXIANA®. But there are some sensible precautions you can take to help prevent this. Some of these are outlined below. If you still have questions, refer to your LIXIANA® package leaflet or speak to your doctor.

#### **What if I need to see my dentist?**

Tell your dentist you are taking LIXIANA® before starting dental treatment. Many dental procedures are noninvasive; in which case the risk of bleeding is low.<sup>13</sup> Your dentist will decide if he or she needs to take any special precautions.<sup>13</sup>

#### **What if I am injured?**

- If you bleed as a result of a minor injury, apply constant pressure to the site for at least 5–10 minutes using a clean dressing<sup>12</sup>
- If you can't stop the bleeding or if you have a major injury, seek medical help immediately<sup>12</sup>

#### **What if I think I am pregnant?**

Oral anticoagulants taken in the early weeks of pregnancy may carry a risk of damage to the unborn child. Taking LIXIANA® if you are pregnant or breastfeeding is prohibited. If you are a woman of childbearing age and you think you may be pregnant or are planning a pregnancy, consult your doctor immediately.<sup>9,12</sup>

**If you have any unanswered questions, refer to your LIXIANA® package leaflet or contact your doctor.**

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Job ID: 6115-11747; Date of Preparation: February 2022