

## Patient information

# Superficial thrombophlebitis

## What is superficial thrombophlebitis?

Superficial thrombophlebitis (or superficial venous thrombosis as it can be called) is the inflammation of the superficial veins (veins that are located just below the skin) with an associated venous clot, unlike a deep vein thrombosis that affects the deep veins of the affected area.

## Who is at risk of developing superficial thrombophlebitis?

Anyone can develop superficial thrombophlebitis, but it is more likely to occur if you have varicose veins, are pregnant, smoke, have had recent surgery, have had prolonged periods of immobility or travel, or on oestrogen based hormone therapy. It is also more common if you are elderly but that alone is not a risk factor.

## How is superficial thrombophlebitis diagnosed?

Superficial thrombophlebitis is usually diagnosed by a simple examination and history undertaken by your GP. Your GP may have requested that you have a specific blood test called a D-dimer to help exclude the presence of a clot. Superficial thrombophlebitis can also be diagnosed by having an ultrasound scan of the affected limb.

## How is superficial thrombophlebitis treated?

Treatment of superficial thrombophlebitis is dependent on where the clot has developed. Usually superficial thrombophlebitis is treated with simple anti-inflammatory drugs such as ibuprofen or a topical gel that contains a small amount of the drug called heparin (blood thinner). Heparin thins the blood so that the clot does not get any larger. It is sometimes necessary to have a short course of anticoagulant

(blood thinner) medication such as rivaroxaban to prevent the clot from becoming any larger if the clot is confirmed as being close to the deep veins. This helps in preventing the clot extending into the deep veins and causing a deep vein thrombosis.

## **What are the complications of superficial thrombophlebitis?**

The major complication of superficial thrombophlebitis is the development of a deep vein thrombosis (DVT). For this reason those patients who are deemed high risk are placed on anticoagulant (blood thinner) medication to prevent further clot formation. The colour of the skin of the affected area may change to a brownish colour.

## **What can I do to help with the symptoms?**

As well as the treatment that has been prescribed/recommended for you, simple painkillers such as paracetamol can be taken.

We recommend that you remain as mobile as possible, keep well hydrated and elevate the affected limb when sitting. Compression stockings may help with the symptoms, but these need to be Grade 2 medically recommended stockings.

## **Further information**

If you have recurrent episodes of superficial thrombophlebitis and have varicose veins your GP may refer you to a vascular surgeon for further opinion and management.

For further information or if you have any questions in relation to your treatment please call the DVT clinic on 01284 713092 (Monday to Saturday 8.00am to 4.00pm) or consult your GP.

West Suffolk NHS Foundation Trust is actively involved in clinical research. Your doctor, clinical team or the Research and Development Department may contact you regarding specific clinical research studies that you might be interested in participating in. If you do not wish to be contacted for these purposes, please email [info.gov@wsh.nsh.uk](mailto:info.gov@wsh.nsh.uk). This will in no way affect the care or treatment you receive.

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