Will I need special follow up when taking Clexane?
You will be asked to attend for a blood test to check your heparin levels every 4-12 weeks, so that we can check whether your dose needs to be altered. We will also give you a repeat prescription for Clexane when you attend, or send it in the post if the dose is changed. The Clexane usually needs to be collected from the pharmacy at the Queen Elizabeth Hospital.
You will, of course, also need your normal antenatal appointments with your doctor or midwife.

What should I do if I am worried or need advice about my Clexane?
If you have any questions or concerns about having Clexane treatment please feel free to contact us on one of the numbers below.
If you need a repeat prescription, please contact the laboratory.
If you are worried, or need urgent advice out of normal hours, please contact Delivery Suite.

Telephone numbers:
Pam Jordan (Specialist Midwife, Antenatal Clinic) 07814 685081
Specialist Midwives (Pre-pregnancy counselling and pregnancy loss clinic) 0121 627 2684
Haematology Laboratory 0121 627 2737
Dr W Lester (Haematology Consultant) 0121 627 2737
Delivery Suite 0121 627 2665

Please remember that many hundreds of women at this Trust, and thousands more across the world, have used Clexane safely in pregnancy.
What is Clexane?
Clexane is a modern type of heparin (low molecular weight) which is used to reduce the risk of blood clots (thrombosis). It is sometimes used to try to reduce the risk of certain types of miscarriage. Clexane has to be prescribed by a doctor, and is always given by injection under the skin (subcutaneous). It is usually given once, sometimes twice a day.

What is the benefit of Clexane?
Clexane reduces the risk of blood clots by ‘thinning’ the blood slightly.

Why do we give Clexane in pregnancy and after the birth of a baby?
During pregnancy, the risk of blood clots is increased due to the normal changes occurring in the blood, causing the blood to become more “sticky”. Following the birth of the baby, the risks remain high as the mother’s body adapts to not being pregnant. It is important to continue Clexane treatment during this time, and some women will be started on Clexane just to cover the period after the birth.

Clexane is given to women who are thought to have a higher chance of clots during this time because of their history, or the results of blood tests. Some women will be given Clexane as part of their treatment because of previous miscarriages or certain pregnancy complications.

When is Clexane given?
Clexane treatment may be given during pregnancy and/or for between 1 and 6 weeks after the birth of the baby, when the risk of clots is highest.

Although we may start Clexane treatment very early in pregnancy, it is not recommended to start Clexane when planning a pregnancy. This is because of the uncertainty about the length of time it may take to conceive. It is preferable to give medication for the least time possible, to reduce the risk of side-effects.

Are there any risks linked with Clexane treatment?
Clexane is considered to be safe to use in pregnancy as it does not cross the placenta and does not appear to affect the baby.

The most common side effect for the mother is a small amount of bruising at the injection site. The risk of bleeding with low dose Clexane, due to the “thinning” of the blood, is small. Clexane doesn’t usually cause bleeding by itself, but bleeding caused by other things, for example from a cut or from the womb, may be a little heavier than normal.

Women are advised to stop taking the Clexane when they start in labour, or leave out the dose on the morning of a planned delivery. An epidural or spinal anaesthetic cannot be given within 12 hours of a dose of Clexane (24 hours for twice a day injections). Clexane will usually be started again at least 4-6 hours after delivery.

The old type of heparin (unfractionated) could sometimes cause osteoporosis (thinning of the bones). This is much less likely with modern heparin such as Clexane, but it is advisable to have plenty of calcium in your diet (for example from milk, cheese and yoghurt).

It is possible to get a local skin rash at the site of the injection. If this happens, or if there is any unexplained bruising or bleeding, please contact the hospital on one of the numbers on the back of this leaflet.

Are there alternatives to Clexane?
If a woman has an allergy to Clexane (very rare), there are other types of injection which can also thin the blood.

How do you give Clexane?
The syringes come ready prepared with the correct dose for you to give. You will be shown how to give your own injections, and most women, or their partners, manage this very easily. The needle on the syringe is very fine, and although the injection may sting slightly, it is not usually too painful. You will be given a sharps box so that you can dispose of the syringes safely.

Instructions
- Make sure you have a sharps box and cotton wool ball ready for after the injection
- Wash your hands before giving the injection
- It is best to give the injections into the skin of your tummy, avoiding the area near to your belly button. You can use your upper thigh if preferred
- Hold the syringe firmly (like a dart) and, with the other hand, pinch as large a roll of skin as possible
- Push the needle directly down into the skin. When all of the needle is in the skin, press the plunger of the syringe down firmly until all of the Clexane has been injected. Do not worry about any small air bubble in the syringe
- Take out the needle and press on the injection site with cotton wool for 2 minutes. Do not rub the area
- Put the syringe straight into the sharps box and close the lid
- Avoid any sore, red or bruised areas and try to use a slightly different site for the injection each time

How should Clexane be stored?
It does not need to be kept refrigerated. It is important to keep the stock of injections in a safe place, out of reach of children. You should ask for a new sharps box before the old one is completely full. Used sharps boxes should be closed / locked and returned to the hospital for safe disposal.