

# INVESTIGATING BLOOD CLOTS DURING PREGNANCY



Although investigations may carry some risk, **they are all safe in pregnancy.**

## IF A DEEP VEIN THROMBOSIS (DVT) IS SUSPECTED THE FOLLOWING INVESTIGATIONS CAN BE PERFORMED:

- Compression duplex ultrasound (no radiation to baby).
- MRI pelvis (no radiation to baby) – if clots in the pelvic veins are suspected.

Confirming a diagnosis is important so that treatment can be given and also excluding a pulmonary embolism (PE) is important so treatment is not given unnecessarily.

## IF A PE IS SUSPECTED THE FOLLOWING INVESTIGATIONS CAN BE PERFORMED:

- Chest X-ray (tiny dose of radiation, not considered harmful to you or baby): To exclude other causes of breathlessness.
- Electrocardiogram (ECG, no radiation to baby): This may also be helpful in identifying alternative diagnoses.
- CT-pulmonary angiogram.
- In some hospitals a ventilation-perfusion scan may be offered, if a CTPA is not. (V/Q, slightly increased risk of childhood cancer 1/280,000 vs 1/1,000,000 but lower risk of maternal breast cancer than CTPA).

The Royal College of Obstetricians and Gynaecologists (RCOG) Guideline: 'Thromboembolic Disease in Pregnancy and the Puerperium: Acute Management Green-top Guideline No. 37b', explains the relative risks associated with increased levels of radiation received in certain tests listed above:

'The delivery of 10 mGy of radiation to a woman's breast has been estimated to increase her lifetime risk of developing breast cancer by 13.6% above her background risk. For a 25-year-old whose background risk of developing breast cancer in the following 10 years is 0.1%, the extra risk from 10mGy of radiation increases the risk by 13.6% of 0.1%, which is 0.0136% extra.'

