

WOMEN & BLOOD CLOTS

Throughout their lives, women face crucial choices that can contribute to their risk of life-threatening blood clots.

Choices connected to birth control, pregnancy, and the treatment of menopause symptoms must be carefully weighed to reduce the risk of blood clots.

Pregnancy hormones, such as estrogen, cause women's bodies to produce more clotting factor proteins very early in pregnancy, so that their blood will clot more readily and protect them from any bleeding challenge that might occur with a miscarriage or during childbirth. This makes pregnancy a major risk factor for blood clots.

When birth control methods to prevent pregnancy, or hormone therapies to treat menopause symptoms, are made with pregnancy hormones like estrogen, they can cause these same clotting factor proteins to increase, putting women at greater risk for dangerous blood clots.

ESTROGEN & BLOOD CLOTS

BIRTH CONTROL

REDUCE YOUR RISK

Options to decrease or avoid blood clot risks connected to birth control methods that contain estrogen include:

- Barrier methods
- Spermicides
- Copper IUD
- Tubal ligation or vasectomy for male partners
- Progestin-only pills
- Progestin IUD
- Progestin implant

The most common method of birth control in the U.S. is the birth control pill.

Birth control methods – like the pill, patch, and ring – are made with pregnancy hormones, like estrogen, and increase a woman's risk for blood clots.

The use of the birth control pill increases a woman's risk for blood clots three-fold. Some newer birth control pills pose a risk two-times greater than older birth control pills.

Birth control patches and rings pose a blood clot risk double that of birth control pills, and the amount of estrogen absorbed from the patches is shown to be 60% higher than the amount of estrogen delivered by pills.

Injectable progestin or DMPA may increase blood clot risk up to two-fold.

Pregnancy is a major risk factor for the development of dangerous blood clots, due to the natural biological response that protects women from life-threatening bleeding during childbirth or if they have a miscarriage.

When pregnant, a woman's blood clot risk increases four-fold. In the weeks right after childbirth, that risk increases to 20-fold.

In the first week after childbirth, the risk is 100-fold greater than normal.

PREGNANCY & CHILDBIRTH

REDUCE YOUR RISK

Discuss your blood clot risks with your doctor before you get pregnant or as soon as you learn that you are pregnant.

Women who should take blood thinning medication when they are pregnant include:

- Women who have had a blood clot in the past and are already on blood thinning medication
- Women who have had a blood clot in the past, but are not currently on blood thinning medication
- Women who develop a blood clot during pregnancy
- After delivery, women who did not have a previous clot, but may have other risk factors

HORMONE REPLACEMENT THERAPY

REDUCE YOUR RISK

To avoid the blood clot risks connected to hormone therapy, women should talk to their doctor about non-estrogen and natural treatments for menopause symptoms.

The physical symptoms of menopause - like mood change, hot flashes, sleeplessness and vaginal dryness - are sometimes treated with hormone therapy.

Hormone therapies contain estrogen and can increase a woman's risk for life-threatening blood clots up to three-fold.

Blood clot risks due to hormone therapy are much higher among women with a blood clotting disorder or with a history of blood clots, unless they are on anticoagulation therapy or blood thinning medication.

WHY ARE BLOOD CLOTS DANGEROUS?

Dangerous blood clots often form in the deep veins of a person's arm or leg. This type of blood clot is called a deep vein thrombosis or DVT. If a DVT is left untreated, it can break off or travel to the lungs.

A blood clot that travels to the lung is called a pulmonary embolism or PE and can be life-threatening.

About 9000,000 people are affected by blood clots each year, and about 100,000 people die each year due to blood clots.

More people die each year due to blood clots, than due to AIDS, breast cancer, and automobile accidents combined.

PREVENT BLOOD CLOTS

Talk to your doctor about your health history and your potential risk factors for blood clots. Women are at greater risk of blood clots if they have a family history of clotting or previously experienced a blood clot. Talk to your doctor about ways that you can reduce the risks associated with birth control with estrogen, pregnancy, and hormone therapy.

Never ignore the **signs and symptoms** of a blood clot:

LEG OR ARM CLOTS

- Swelling, pain, or tenderness
- Redness or discoloration
- Skin that is warm to the touch

LUNG CLOT

- Shortness of breath
- Chest pain that worsens with a deep breath
- Coughing up blood

Learn more about reducing your risk for dangerous blood clots when making choices connected to family planning, pregnancy, and the treatment of menopause symptoms at:

www.womenandbloodclots.org