The Royal Children's Hospital Melbourne
50 Flemington Road
Parkville Victoria 3052 Australia
TELEPHONE +61 3 9345 5522
www.rch.org.au

What is Clexane?

Clexane belongs to a group of drugs called *anticoagulants*. Clexane stops unwanted blood clots from forming and can stop any blood clots that have already formed from growing bigger. Clexane does NOT break down blood clots that have already formed. Clexane acts as a roadblock, interfering with how the process of blood clotting occurs.

Who needs Clexane?

Infants and children are given clexane for only two reasons.

1. They have had a blood clot and are taking clexane to make sure the blood clot doesn't grow or break off and travel to another part of the body (e.g. the lungs).
2. They haven't had a blood clot yet, but for some reason their doctor thinks they have a bigger risk than other people for getting a blood clot.

How do I give clexane?

Clexane cannot be taken by mouth, or given through an intravenous drip. It must be given by injection under the skin, twice a day.

We can make these injection a little bit easier for infants and children by using an *Insuflon* catheter. *Insuflons* are small devices that are placed into the layer of fat between the skin and muscles. They can stay in place for 7 days. A child can then have their clexane injected into the *insuflon,* where the body will absorb it. Before inserting an *insuflon,* we can place some local anaesthetic cream over the site where it will be placed. This is usually the stomach or the outer side of the thigh. Once the skin has been made numb, the cream is removed. A small needle guides the *insuflon* into place, and is then removed, leaving a very small plastic tube sitting under the skin.

Monitoring Clexane Therapy

The amount of clexane needed by a child is based on how much they weigh. A blood test is taken a few days after starting clexane to work out how a child's body is responding to the medication. This test is called an anti-Factor Ten-A (anti-Xa) test. Once a child's anti-Xa level is in the right range, we usually don't need to do blood tests more often than once every two to four weeks.

Precautions

Bleeding is the most common side effect of clexane therapy. You can make the risk of bleeding much smaller by injecting the correct dose of clexane and having blood tests when instructed.

Contact the Haematology Department if any of the following happen:

- Any head injury caused by a fall or knock to the head, even if there was no loss of consciousness or headache.

The Children's
Excellence in clinical care, research and education
The Royal Children's Hospital Melbourne
Murdoch Childrens Research Institute
THE UNIVERSITY OF MELBOURNE

- Prolonged bleeding:
  - from minor cuts.
  - from the gums after brushing of teeth.
  - from the nose.
  - during periods.
- Severe headache or back pain
- Bruises or tender swollen areas without clear cause.
- Blood in the urine, poo, vomit or coughed up from the lungs.

Very uncommon side-effects of clexane include hair loss and 'thinning' of the bones (both resolve when clexane is stopped). There is a very rare condition that can happen in patients taking clexane that causes part of the blood that helps with clotting (the platelets) to stop working properly. Your doctors will keep an eye out for all these problems, but they are very uncommon.

There are some medicines you can buy without a prescription that can affect clexane. Unless told by a doctor, do not give Aspirin, anti-inflammatory medicines (eg Nurofen), or herbal remedies to children receiving clexane.

Sport and Activity

Clexane makes the risk of bleeding bigger, so contact sports should be avoided (e.g. football, rugby, martial arts). When riding a bicycle, rollerblading or participating in any activity where falling is possible, a helmet should be worn. A child's usual physical activities should be discussed with the Haematology Department, and if there are any changes to these activities, the Haematology team should be notified.

Seeing Other Doctors/ Dentists/ Health Specialists

Tell any other doctors or health professionals (eg. physiotherapists, chiropractors, dentists etc) that you are taking clexane. They may need to think about how clexane affects what they plan to do to you.

If you wish to contact the Haematology Team, contact options are listed below:

Non-Urgent Contact

Haematology Team Answering Machine
Telephone 9345 5827
(Messages are checked daily Monday to Friday – for urgent concerns see below)

Urgent Contact

Monday to Friday 9am to 5pm
Haematology Registrar
Telephone 9345 5522
Ask for pager # 5914.

After-hours Weekdays and Weekends

Telephone 9345 5522
Ask for the "On-call Haematologist"