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'You can die instantly': Cancer survivor's warning about blood clots

October is World Thrombosis Month, and patients and doctors alike are urging people to learn signs and symptoms of potentially fatal clots.

Megan Devlin / Richmond News

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Windeline Galang developed a blood clot in her arm that led doctors to discover her breast cancer had returned. Photo: Richmond News/Megan Devlin

A Richmond cancer survivor is sharing her story of a close call with a blood clot to urge others to learn the signs and symptoms of the circulatory blockages that kill thousands of Canadians every year.

Windeline Galang lives with her daughter in the ground floor of a south Richmond home with her sister's family above. She was diagnosed with breast cancer just after her 50th birthday in 2013.

"My journey is pretty tough. I've been going through a lot. Right now, I'm still on chemo," she told the *Richmond News*.

Dr. Agnes Lee, a hematologist, says her patient has "gone through the whole gamut." Lee is director of the thrombosis (blood clot) program at Vancouver General Hospital. Her research led to a new drug becoming the standard of care for cancer patients with clots about 15 years ago.

For a [number of reasons](#), including tumours excreting proteins that trigger clotting and chemotherapy damaging blood vessel lining, cancer patients are vulnerable to developing blood clots. Clots are the second leading cause of death for them, behind only cancer progression.

Galang won her first battle with cancer, but went back to her doctor in 2016 when her left arm became swollen.



Windeline Galang at her home in Richmond. Photo: Richmond News/Megan Devlin

"It was really, really big. And it was shiny. And ... it was heavy," she said, miming lifting the dead weight of her left arm with her right.

"I didn't know what was happening. I didn't know anything about blood clotting."

A CT scan and an ultrasound confirmed her arm was engorged with blood because of a clot. As it turned out, that was the first sign her cancer had returned.

She had to leave her job at a compounding pharmacy after that news. Her daughter, who just graduated high school, works as an administrative assistant to support them and Galang's sister takes time off work to drive her to VGH.

She's still getting regular chemotherapy as doctors keep an eye on the cancer, and anti-coagulants to prevent another clot.

"I'm more concerned about the blood clot than my cancer," Galang said. "Because clotting, you can die instantly."

Blood clots are supposed to happen naturally to stop us from bleeding when we're injured. But sometimes the clotting process goes into overdrive and clots form inside the body's large blood vessels. Problems happen when they plug the vessel and block blood flow, or break off and travel to the heart and lungs.

"It's kind of like bad traffic," Lee said. "That blood will get backed up into tissues and organs and can cause damage."

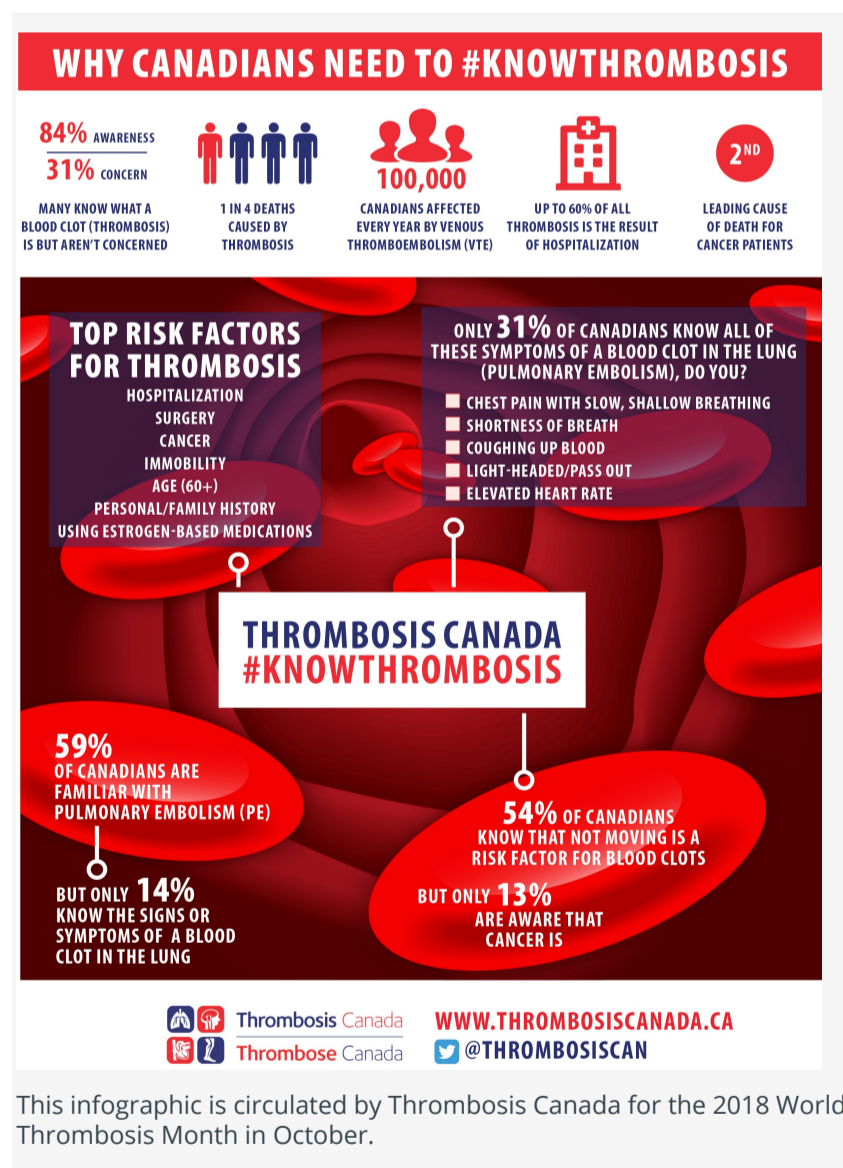
Things get dangerous when a clot occurs in key organs, like the brain (a stroke), the heart (a heart attack) or the lungs (pulmonary embolism).

Many people do die from them every year in Canada. Of the roughly 100,000 Canadians who will develop a clot every year, about 10,000 won't survive.

Pulmonary embolisms cause more deaths each year than breast cancer, HIV and car accidents combined, Lee said.

A survey by Thrombosis Canada that polled roughly 1,000 Canadians suggested a troubling lack of knowledge about the signs, symptoms of blood clots and confusion surrounding risk factors.

While people are generally aware of what heart attacks and strokes feel like, fewer know about blood clots in the lungs or Deep Vein Thrombosis (most often clots in the legs). They also had trouble identifying the most serious risk factors for developing clots.



Lee thinks it's imperative to do a better job educating the public since there is effective treatment available.

Galang remembers being injected with a high dose of anti-coagulant drugs as soon as doctors figured out she had a clot. They're commonly referred to as blood thinners, even though they just block the clotting process and don't actually thin your blood.

Two years later, she still receives the regular injections to prevent the clot from coming back.

"I would say, if you see something that swollen, go see a doctor. Don't just ignore it," she said.



Dr. Agnes Lee is the director of the thrombosis program at Vancouver General Hospital. Photo: Submitted

That's particularly good advice for Richmond's retiree population, since the risk of a healthy individual getting a blood clot doubles for every decade over 50.

Richmond Hospital doesn't have a dedicated blood clot clinic like at VGH, but RGH has a policy that patients who are diagnosed with a blood clot will be seen by a specialist at VGH's thrombosis clinic the next day.

It's the only specialized clotting clinic in the province, and many patients aren't as lucky as Richmondites who can hop over a bridge to get specialized care.

"If I had my way, I would expand our thrombosis program," Lee said, adding she'd want to train a network of doctors, nurses and pharmacists around the province to act as "satellites" so patients near and far could have the same access to education and support.

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