

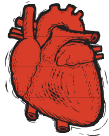
# A Patient's Guide to Anticoagulant Therapy

August 2008



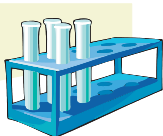
## What is it?

Warfarin, an anticoagulant (trade name Coumadin and others) is a medication taken by mouth to reduce the formation of blood clots. It is sometimes referred to as a "blood thinner". Warfarin must be taken exactly as prescribed and must be monitored with regular blood laboratory tests.



## Why is it used?

It is prescribed for conditions such as clotting in veins (venous thrombosis), heart attack or stroke, some heartbeat irregularities and for people who have artificial heart valves. Too much warfarin may lead to serious bleeding, and too little will not prevent clotting.



## How does the doctor monitor your anticoagulation level?

The doctor will order an International Normalized Ratio (INR), which is derived from a clotting test called the Prothrombin Time (PT). This test evaluates the ability of blood to clot properly and can also be used to assess bleeding tendencies.



## When is a PT/INR ordered?

If you are taking warfarin, your doctor will check your PT/INR regularly to make sure that your PT/INR is in the range necessary to be effective. There is no set frequency for doing the test, but it is essential that it is monitored. Your doctor will order it often enough to make sure that the medication is creating the desired effect.



## What is the target range?

Your doctor will determine the range of PT/INR that is right for you and decide how frequently it should be checked. Normally, PT/INR is checked at least weekly initially, and then less frequently, for example once a month; more frequent testing may be necessary in some situations. Try to have your test performed in the morning on a weekday, so your doctor can adjust your dose on that day, if necessary.



## When should I take the anticoagulant?

Warfarin should be taken once a day, preferably at the same time each day.



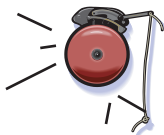
## What should I do if I miss a dose?

DO NOT take a double dose the next day to catch up. Resume normal dose, and consult your doctor regarding the timing of your next INR.



## Where should I store my medication?

Store the medication in a cool dry place (not a bathroom cabinet) away from the reach of children and pets.



## What are the possible side effects?

The most common and serious side effect is bleeding. Allergic reactions occur, but they are rare.

**If you experience any of the following symptoms, call your doctor immediately:**

Red or dark brown urine Red blood, or black color in your stool	Unusual weakness Excessive menstrual bleeding or unexpected bleeding from the vagina	Dizziness, trouble breathing or chest pain Unusual pain, swelling or bruising
Severe headache	Bleeding from shaving or other cuts that does not stop	Dark, purplish or mottled fingers or toes
Vomiting or coughing up blood	Prolonged bleeding from gums	Nose bleeds



### Can I still have an alcoholic drink?

Moderate (one to two drinks a day), alcohol intake does not influence warfarin therapy; however, binge or excessive drinking should be avoided.

### Is there anything else I should know? Yes!



- **Medications can affect your treatment.**

Tell your doctor about all other diseases you have and all the medicines you take, including over the counter drugs, antibiotics, aspirin, acetaminophen (Tylenol), oral contraceptives, hormone-replacement therapy (HRT), and vitamin K – either in a multivitamin or liquid nutrition supplement – as these medications can alter your PT/INR results.



- **Alternative medicines can affect your PT/INR.**

Tell your doctor about all other alternative medicines you are taking such as, herbal teas, vitamins, special diets and herbs such as ginkgo, danshen and devil's claw as they increase the effect of anticoagulants. Some sedatives, coenzyme Q, and ginseng decrease the effect of warfarin.



- **The PT/INR of a patient taking warfarin may be altered by a change in diet.**

Certain foods (such as beef and pork liver, green tea, broccoli, chickpeas, kale, turnip greens, and soybean products) contain large amounts of vitamin K and can alter PT/INR results. Make sure that your doctor knows when discussing your warfarin dosage all the drugs you are taking, and if you have eaten large amounts of any of these foods recently, so that the PT/INR results are interpreted and used correctly.



- **The Vitamin K content of your diet should be kept constant.**

Many foods that you eat contain vitamin K, which helps the blood to clot. You should not avoid vitamin K rich foods; however, make sure that the vitamin K content of your diet remains the same. The best way to do this is by avoiding changes to your normal eating patterns. Continue to eat a balanced diet containing a variety of foods – including vitamin K rich foods such as green leafy vegetables, soybeans and canola oil.



- **Illness, whether a viral or bacterial infection, an episode of vomiting, diarrhea or nausea, lasting more than 24 hours or congestive heart failure may affect your body's response to anticoagulants.**

Notify your doctor, if you suffer from any of these conditions.



### Do Women Have Any Special Concerns?

Tell your doctor if you are, or are planning to become pregnant. Warfarin can harm the developing fetus, however; if you are breastfeeding you may take warfarin, since it is not secreted in mother's milk in appreciable concentrations.

### Other Advice!



- For routine testing it is advisable to visit your laboratory early in the day and avoid Friday or the weekend. The laboratory should then be able to easily communicate results to your doctor. If these results indicate the need for a change in your warfarin dosage, this can be done before you have taken more of the drug.

- You may consider wearing a medical alert bracelet or carrying a wallet card indicating details of your anticoagulant use.

- Alert specialists, emergency room physicians, dentists, pharmacists, etc., that you are taking an anticoagulant.

- **Travel tips**

- Carry identification explaining the reason you are taking anticoagulant therapy, the target range for your PT/INR, and current dosage.

- Carry the anticoagulant record sheet (ask your doctor for a copy).

- Make sure you have enough medication to last through your trip.

- Carry your medications with you at all times. Do not put medications in checked baggage.

- Try to maintain your eating habits and activity level as close to normal as possible.

### References:

- Guidelines and Protocols Advisory Committee (2004). Warfarin A Guide for Patients February, 2007 from the Government of British Columbia Ministry of Health, Medical Services Plan Website: <http://www.healthservices.gov.bc.ca/msp/protoguides/>
- Campbell, Peter. Managing warfarin therapy in the community. Australian Prescriber Vol.24 No.4, 2001. Retrieved February, 2007 from the Australian Prescriber Website: <http://www.australianprescriber.com/magazine/24/4/86/9/>