

WARFARIN

What is warfarin?

Warfarin is the most widely prescribed anticoagulant in the UK. Anticoagulants reduce the risk of blood clots forming, which is important in the prevention of heart attacks, strokes and blockages of major veins and arteries. Warfarin is normally prescribed if you have an increased risk of forming blood clots (for example you have atrial fibrillation, deep vein thrombosis or a mechanical heart valve replacement). As warfarin prevents blood from clotting you should be aware of the increased risk of bleeding.

What should I look out for when taking warfarin?

- If you hurt yourself in any way, watch out for signs of excessive bleeding (for example, heavy bleeding from cuts and wounds or when shaving) and bruising.
- Any spontaneous problems such as a nosebleed that continues for more than 10 minutes.
- If there is bleeding within the body it may show itself as dark coloured bowel movements or dark coloured urine, which would indicate bleeding in the bowel or in the bladder.
- If you become ill with vomiting, the vomit may appear blood streaked.
- Your periods may be heavier than normal.
- When brushing your teeth you may notice bleeding gums.

You must go to see your doctor if you experience any of these.

How is my warfarin monitored?

The effect of warfarin is monitored by regular blood tests, that measure how long it takes your blood to clot, called the INR (International Normalised Ratio).

Based on this blood result your doctor will be able to prescribe the appropriate dose of warfarin that will help to keep your warfarin levels within the desired range for you. Different medical conditions require different INRs.

When beginning warfarin therapy these blood tests have to be taken week to week and the dose prescribed may alter depending on the results.

Once the dose has stabilised the tests are normally only needed every 4-8 weeks.

For some people, self-monitoring may be appropriate. This is when you test your blood yourself at home and either contact your healthcare professional to adjust your warfarin dose (self-testing), or you adjust your own warfarin dose according to an agreed protocol (self-management). Self-monitoring will not be suitable for everyone taking warfarin.

FACTSHEET

What other factors can affect the action of warfarin?

Medicines

Many medicines can interfere with the action of warfarin. You must always check with your doctor or pharmacist before taking even 'simple' things like vitamin supplements and over the counter remedies.

Aspirin and non-steroidal anti-inflammatory drugs such as ibuprofen should also be avoided as these increase the risk of bleeding.

Alcohol

Alcohol will increase your INR and so increase your risk of bleeding. If you drink alcohol, follow the recommendations for safe drinking, and do not drink large amounts of alcohol in one sitting.

Diet

Try and eat a normal balanced diet and avoid sudden changes especially just before having blood taken.

Foods that are high in Vitamin K (for example, liver and green leafy vegetables such as broccoli, cabbage, watercress, spinach and brussel sprouts) will lower your INR readings. You do not need to avoid these foods as they are good for you but you should be aware of keeping your intake consistent.

It is recommended that you avoid cranberry juice when taking warfarin as it increases the anticoagulant effect of warfarin and could trigger bleeding.

Taking warfarin

- You must take warfarin exactly as directed by your doctor. If you do not understand these directions ask your pharmacist, nurse or doctor to explain them to you.
- You must always tell anyone treating you such as a doctor, dentist or pharmacist that you are taking warfarin.
- Always carry your anticoagulant card with you.
- To keep your blood results consistent it is important to take your warfarin at the same time every day.
- Never adjust the dose yourself.
- Never take an extra dose to catch up if you miss a dose.
- If you miss a dose take it as soon as you remember up to 12 hours late. If it is more than 12 hours late you should not take it and take your next dose at your normal time.
- Check with your doctor if you are unable to eat for several days or if you have continuing stomach upset, diarrhoea or fever.
- Never stop taking warfarin without medical supervision.



Other anticoagulant drugs

There are some newer anticoagulants available that do not need monitoring or dose adjustment.

New anticoagulants currently in use are:

- Dabigatran (Pradaxa®)
- Rivaroxaban (Xarelto®)
- Apixaban (Eliquis ®)

However, with these medicines it is essential that you take them every day as they act for a much shorter time than warfarin. This means that if you miss a dose you will not be protected against clots forming.

Further information:**AntiCoagulant Europe**

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Chest Heart & Stroke Scotland improves the quality of life for people in Scotland affected by chest, heart and stroke illness, through medical research, influencing public policy, advice and information and support in the community.

If you would like to speak to one of our nurses in confidence,
please call the Chest Heart & Stroke Scotland Advice Line Nurses

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Call FREE from landlines and mobiles