

# Direct Oral Anticoagulant Therapy

Important information  
for patients



## Your information

---

Name

Hospital number

NHS number

Date of birth

E-mail

Contact number

Condition requiring anticoagulation

Name of anticoagulant

Dose

Intended duration of treatment

Clinician managing anticoagulation

Date anticoagulation commenced

Contact details for urgent advice

## Details of renal function monitoring

Date	CrCl (ml/min)	Date of next test	Place of next test

CrCl = creatinine clearance (ml/min)

# **Direct Oral Anticoagulant (DOAC) Information Book**

This book is intended for people on apixaban (Eliquis®), edoxaban (Lixiana®), rivaroxaban (Xarelto®) and dabigatran (Pradaxa®); known collectively as direct oral anticoagulants.

## **Introduction**

Anticoagulants are medicines that prevent harmful blood clots from forming in your blood vessels by making your blood take longer to clot. Some people call anticoagulants blood thinners. The blood is not actually made any thinner - it just takes longer to clot whilst you are taking anticoagulants.

This booklet has been given to you because you are starting to take an anticoagulant medicine. A healthcare professional should go through this booklet with you, explain what it all means and answer any questions you may have.

If this does not happen, please ask.



The healthcare professional will be able to give you advice at the start of your anticoagulant therapy, before you leave hospital, on your first visit to the anticoagulant clinic and at any other time you need it.

There are two main groups of anticoagulants:

1. Vitamin K antagonists (VKA) – usually warfarin
2. Direct inhibitors known as Direct oral anticoagulants (DOACs) or Non-VKA oral anticoagulants (NOACs)

This booklet is for people taking direct oral anticoagulants (DOACs) and provides important information. There is another booklet for people taking warfarin or other vitamin K antagonist anticoagulants.

## How to use this booklet and Alert Card

Please keep this booklet so you can refer to it.

A yellow 'Anticoagulant Alert Card' is also provided, which you should fill in and always carry with you. This identifies that you are taking anticoagulant medication, which may be important in an emergency and to inform healthcare professionals before you receive other treatment.

## What are Direct Oral Anticoagulants (DOACs)?

These are anticoagulant medicines that help to prevent blood from clotting by acting on very specific areas of the clotting system.

These include apixaban (Eliquis®), dabigatran (Pradaxa®), edoxaban (Lixiana®) and rivaroxaban (Xarelto®) and other similar anticoagulants are in production. These work by directly blocking one main clotting factor involved in blood clotting without affecting levels of vitamin K. These anticoagulants *do not* need regular blood monitoring to check how quickly your blood is clotting. However, you will still need

other types of monitoring, for example to check how well your kidneys are working. These anticoagulants start working fully a few hours after you have taken them.

## **Why do I need to take an anticoagulant?**

Anticoagulants are used:

- To reduce the risk of getting a blood clot. Examples of situations when this risk is increased are:
  - you have a condition such as Atrial Fibrillation which increases your risk of having a stroke,
  - you have a blood clotting disorder (may be genetic)
- To treat blood clots, such as deep vein thrombosis, where anticoagulants are used to stop the blood clot getting larger or breaking off and travelling to the lungs (pulmonary embolism).

Your healthcare professional will be able to explain why *you* need to take a DOAC.



## **How long do I need to take an anticoagulant for?**

How long you need to take a DOAC for will depend on the reason you are taking it. Some people will need to take a DOAC for the rest of their lives, others may only need to take a DOAC for a few months. If you are taking a DOAC indefinitely (long-term) you should have an annual review with your healthcare professional to discuss the benefits and risks of your medication. You should not stop taking a DOAC without discussing it with your healthcare professional first.

## **Can anyone take a DOAC?**

No, not everyone can take a DOAC. Vitamin K antagonists are more suitable for some people. You should discuss the benefits and risks of taking these drugs with your health care professional.

## **Do I need to have regular blood tests with a DOAC?**

These drugs do not need regular blood tests (such as the INR test for people on warfarin) to monitor your clotting levels. However you

should have a blood test to monitor your kidney function before you start taking them and then at least once a year.

### **What is the dose of the DOACs?**

The dose of your DOAC will depend on what you are taking the medication for and you should discuss this with the person who is prescribing the medication for you.

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

All DOACs have a short duration of action so this means they do not stay in your body for very long, so it is important to remember to take it every day as prescribed and around the same time(s). If you miss a dose check the leaflet that is in your medicine box and seek help from a health care professional (your anticoagulant clinic, GP, or pharmacist) who oversees your anticoagulant medicine.

Do not take double the dose the next day to make up the missed dose. If you have trouble remembering to take your tablets speak to your doctor or nurse about the many aids that you can use to help you remember.

## **Repeat prescriptions**

Make sure that you do not run out of tablets and always have at least a week's supply. If you are going on holiday it is important to make sure that you have enough supplies of your medicines for the duration of your holiday and speak to your health care professional regarding the timing of your anticoagulant medicine if you are travelling across time zones.

## **Do I need to follow a special diet for the DOACs?**

No special diets are required but some of the DOACs are better taken with food so check with your health care professional when you start taking the medicine

## **Do the DOACs have interactions with other medicines?**

Yes, there are some medicines that may interact with the DOACs, talk to your health care professional about any other medication that you are taking to see if it will interact before you start a DOAC and always let them know when you start or stop other

medications.

Remember to advise other healthcare professionals that you are taking a DOAC so that they can check whether any new medicine they prescribe might interfere with your DOAC. If you are planning to buy over the counter medicines, including alternative remedies, tell the pharmacist that you are taking a DOAC and show them your anticoagulant alert card. They can then advise you on the medicines that are safe to take.

You should not take aspirin unless it has been specifically prescribed by your GP or hospital prescriber. It is also advisable to avoid other aspirin-like medicines (known as non-steroidal anti-inflammatory drugs such as diclofenac or ibuprofen). Please note that some of these can be bought over the counter in pharmacies with names such as Nurofen®.

Paracetamol and codeine-based painkillers are generally acceptable, although be aware that some preparations of paracetamol 'plus'

products contain aspirin.

Always keep to the recommended dose of your DOAC and other medicines you are taking.

## **Alcohol**

It is recommended that you do not exceed the national guidelines. These are up to 14 units a week for men and women spread over the week rather than drinking all 14 units over two days. One pint of beer is two units; one pub measure of a spirit (25ml) is one unit and one pub measure of wine (125ml) is one unit. This can also vary depending on the strength of alcohol.

It is dangerous to “binge drink” while taking anticoagulants.

## **What are the side effects of the DOACs?**

All medicines have the potential to cause side effects for some people. You should read the patient information leaflet that you will find in the box of your medicines. With all anticoagulants, the major side effect can be bleeding.

If you experience any of the following seek medical attention:

- prolonged nose bleeds (lasting more than 30 minutes)
- blood in vomit (may look like ground coffee)
- blood in sputum or phlegm (may look like ground coffee)
- passing blood in your urine or faeces (poo)
- passing black faeces (poo)
- severe bruising without injury or out of keeping with the extent of the injury
- unusual headaches
- for women, heavy or increased bleeding during your period or any other vaginal bleeding

Some patients will notice that they bruise more easily than before. If you cut yourself, apply firm pressure to the site for at least five minutes using a clean, dry dressing.

Seek medical attention if you:

- are involved in major trauma
- suffer a significant blow to the head
- are unable to stop any bleeding

## **Periods**

Women may experience heavier periods while they are taking oral anticoagulants and may wish to discuss this with their GP, anticoagulant nurse, or pharmacist.

## **Pregnancy and Breast feeding**

Oral anticoagulants can seriously affect the development of a baby in early pregnancy. Women who are taking oral anticoagulants should discuss plans for future pregnancy with their doctor before trying to conceive wherever possible.

Women who think they have become pregnant while taking an oral anticoagulant should take a pregnancy test as soon as possible and if this is positive have an urgent appointment with a doctor.

There is no data relating to breast feeding for any of the current DOACs so they are not recommended for women who are breastfeeding.

## Going to the Dentist

You can still go to your dentist as usual, but you should tell your dentist that you are taking an anticoagulant medicine before receiving any treatment.



In most cases your dental treatment can go ahead as normal without your anticoagulant being stopped or the dose being adjusted.

It is important to keep good oral hygiene to reduce gum disease that may lead to bleeding and the need for dental treatment.

## Having surgery or a procedure?

You should tell anyone who is treating you that you are taking a DOAC. If you need surgery or a procedure, make sure that you tell the doctor or surgeon well before the surgery that you are using this medication. If you need to have an anesthetic for a medical



procedure or surgery, you may need to stop using your DOAC for a short time. The doctor will tell you if you need to stop taking it and when to do so and when to start taking it again.

## **Physical activity**

People taking warfarin can usually continue their physical activities and start new physical activities. However, it is advisable to avoid contact sports and other activities in which injuries are common.

Do not stop taking this medication without first talking to your doctor.

## **Carrying a medical identification card**

It is always advisable to carry some sort of identification, so that in the event of you being unable to, it will let others know that you are taking an anticoagulant. The manufacturer of the drug may provide an alert card. There are also a variety of items available to buy that tell people that you are taking an anticoagulant including: credit card size alert cards and medical information bracelets and necklaces.

## Further information

There are a range of patient organisations that can give you further information and support. Their contact details are available from your anticoagulant clinic. In addition below are links to some of their websites:

- Atrial Fibrillation Association (AFA)  
<http://www.heartrhythmalliance.org/afa/uk>
- British Heart Foundation  
[www.bhf.org.uk](http://www.bhf.org.uk)
- NHS  
[www.nhs.uk](http://www.nhs.uk)
- Stroke Association  
<https://www.stroke.org.uk/>
- Thrombosis UK  
<https://www.thrombosisuk.org/>

DRAFT

**Developed with support from British Society for Haematology  
and NHS England and NHS Improvement**