

# Oral Anticoagulant Therapy

**Important information  
for patients**

**The National Patient Safety Agency**

4 - 8 Maple Street

London

W1T 5HD

T 020 7927 9500

F 020 7927 9501

0417

© National Patient Safety Agency 2008. Copyright and other intellectual property rights in this material belong to the NPSA and all rights are reserved. The NPSA authorises healthcare organisations to reproduce this material for educational and non-commercial use.

[www.npsa.nhs.uk](http://www.npsa.nhs.uk)

# Your information

Name:					
Address:					
Postcode:					
Home telephone:					
Mobile telephone:					
Hospital number:					
NHS Number:					

**In an emergency obtain advice from:**

**Name of anticoagulant clinic:**

**Name of specialist nurse or clinic contact:**

**Address:**

**Routine telephone number:**

**Emergency telephone number for advice:**

**Name of GP:**

**Address:**

**Postcode:**

**Telephone number:**

**Condition requiring treatment:**

**Name of anticoagulant:**

**Target INR:**

**Intended duration of treatment:**

**Desired therapeutic range:**

**Referring clinician:**

**Clinician managing anticoagulation:**

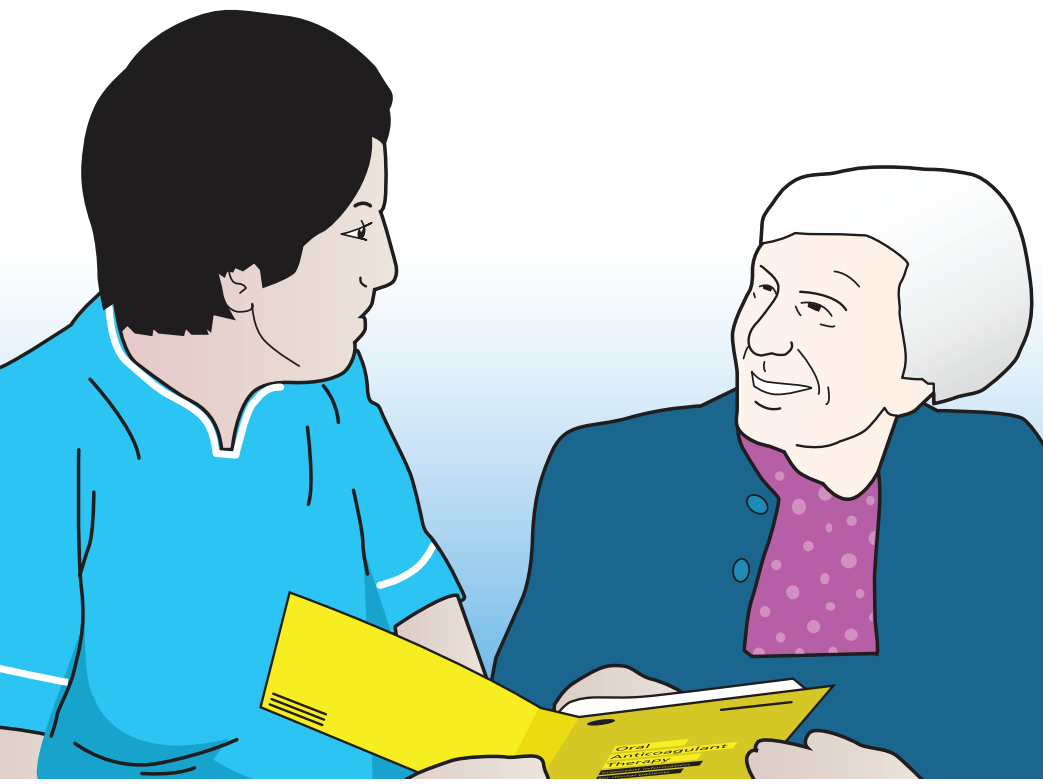
**Date treatment commenced:**

## Important information for patients taking oral anticoagulants

---

### Introduction

This booklet has been given to you because you are starting to take a medicine known as an anticoagulant. A healthcare professional will go through this book with you, explain what it all means and answer any questions you may have. They will be able to give you advice at the start of your anticoagulant therapy, when you leave hospital, on your first visit to the anticoagulant clinic and at any other time you need it.



### How to use this booklet

The booklet provides you with important information about your treatment and contact information for you to obtain further advice. It should remain in your home for easy reference.

An 'Anticoagulant Alert Card' is provided, which you should fill in and carry with you at all times. This identifies that you take anticoagulant medication, which may be important in an emergency and to inform healthcare professionals before you receive other treatment.

Your anticoagulant clinic will also issue you with treatment records that will indicate your latest blood test result, dosage of anticoagulant and date of your next blood test.

Depending on the system used by your anticoagulant clinic, your treatment record may be a separate typewritten form which is sent to you after each blood test, or a cumulative treatment record. These cumulative records may be typewritten or handwritten. There is a space for you to store these records at the back of the anticoagulant folder originally provided with this booklet. You should keep treatment records from the last six months.

You will need to show your latest treatment record form when requesting and collecting a repeat prescription for your anticoagulant therapy.

## Oral anticoagulants

An anticoagulant medicine prevents harmful blood clots from forming in your blood vessels by making your blood take longer to clot.

Warfarin is the most commonly used oral anticoagulant in this country. Others that may be used include phenindione (Dindevan®) and acenocoumarol (Sinthrome®) and they are similar to warfarin in many ways including the side effects and monitoring requirements.

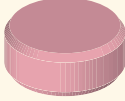
## How do I take my anticoagulant?

Take your anticoagulant once a day, at about the same time, washed down with a full glass of water.

If you miss a dose, or take the wrong dose by mistake, make a note in this booklet. Take only your normal dose the next day. If the dose you took in error greatly exceeded your normal dose please contact your anticoagulant clinic.

You may be given a number of different strength tablets to make up your dose, and it is important that you become familiar with the different strengths and colours that you need to take.

In the UK, the colours of warfarin tablets are:

0.5mg (500 micrograms) – white	
1mg – brown	
3mg – blue	
5mg – pink	

Different brands of warfarin tablets may have different markings to those shown above. Other anticoagulants may come in different strengths and colours.

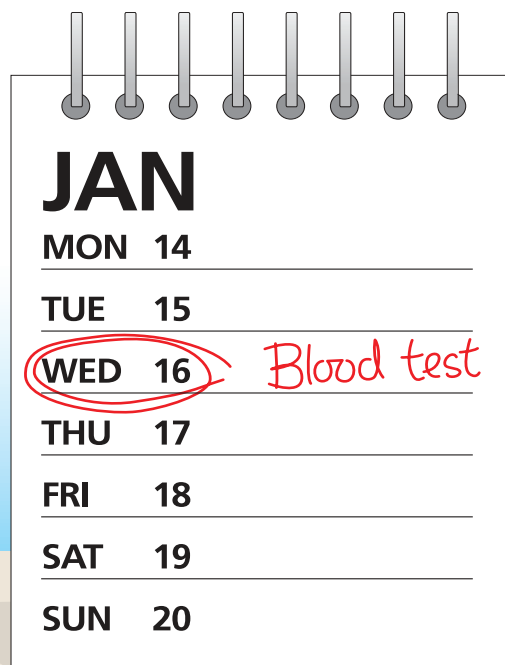
You may need a mixture of different coloured tablets to make up your dose. Your healthcare professional will explain this to you.

**Do not confuse the dose in mg with the number of tablets that you take.**

## Monitoring you while you are taking an anticoagulant

You must have a regular blood test called an INR test. INR stands for International Normalised Ratio.

This is a standard test that measures how long your blood takes to clot. Normally, blood that is not anticoagulated has an INR of approximately 1.0. The dose of anticoagulant that you need to take will depend on your INR test result. If your result is out of the range appropriate for your condition, your dose of anticoagulant will be increased or decreased accordingly. The anticoagulant dose required to achieve the target INR varies for each person.



## The anticoagulant service in your area

Your anticoagulant clinic or your GP will arrange your blood tests for you.

It is important that you tell your anticoagulant clinic about any medicines that you have started or discontinued.

Services differ around the UK and they use different forms of paperwork. Information on how your anticoagulant clinic is run is detailed at the back of the anticoagulant folder originally provided with this booklet.

## Repeat prescriptions

It is important that checks are performed each time you request and receive a supply of oral anticoagulants. This must include reviewing your blood test results and dose information, and ensuring that it is safe to supply you with more tablets.

When you request a repeat prescription you will be asked to provide information about your INR test results and current dose of oral anticoagulant, which you will have collected and kept in your anticoagulant folder.

Your community pharmacist will also ask to see this information when they dispense your prescription.

If you cannot request or collect the prescription yourself, make sure that the person representing you has this

information with them.

For prescription delivery services, the pharmacist dispensing the prescription should contact you to confirm your INR and current dose.

Make sure that you do not run out of tablets and always have at least a week's supply.

### Serious side effects

The most serious side effect of anticoagulants is bleeding. If you experience any of the following, seek medical attention and have an urgent INR test:

- prolonged nosebleeds (more than 10 minutes);
- blood in vomit;
- blood in sputum;
- passing blood in your urine or faeces;
- passing black faeces;
- severe or spontaneous bruising;
- unusual headaches;
- for women, heavy or increased bleeding during your period or any other vaginal bleeding.

If you cut yourself, apply firm pressure to the site for at least five minutes using a clean, dry dressing.

Seek immediate medical attention if you:

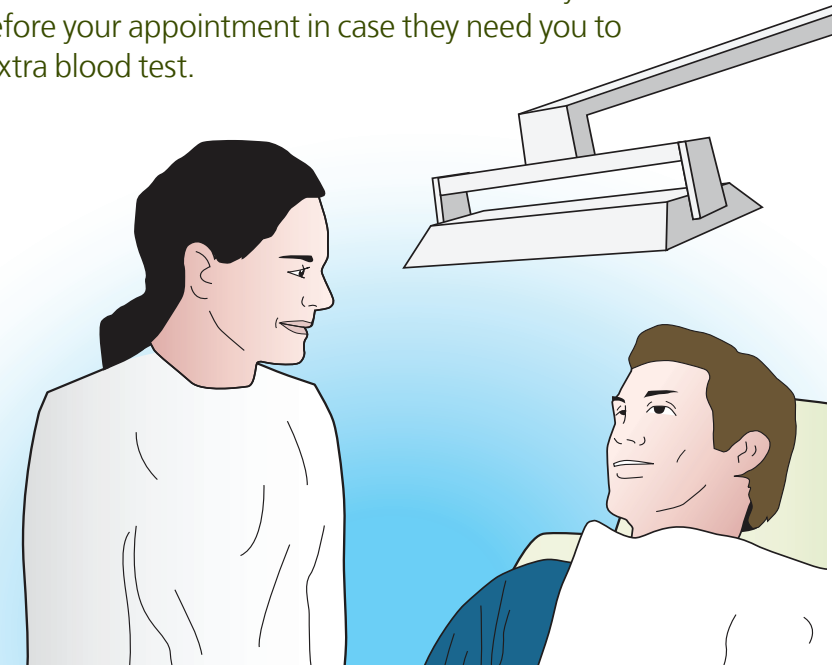
- are involved in major trauma;
- suffer a significant blow to the head;
- are unable to stop bleeding.

### Going to the dentist

You can still go to your dentist as usual.

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

However, your dentist will need to see a recent INR test result to ensure that it is safe to provide treatment. Your dentist will be able to provide you with a leaflet which explains this and give you some additional advice. You should contact your dentist before your appointment in case they need you to have an extra blood test.





## Things that can affect the control of anticoagulation

---

### Other medicines

Many medicines can interact with anticoagulants.

If, during your course of anticoagulants, you are also starting or stopping another medication, the prescriber may advise that you should have a blood test within five to seven days of starting the new medication. This is to make sure that your INR remains within the desired range. Please contact your anticoagulant clinic for further advice.

If you are planning to buy over-the-counter medicines, including alternative remedies, tell the pharmacist that you are taking an oral anticoagulant and show them your anticoagulant alert card. They can then advise you on medicines that are safe for you to take.

You should not take aspirin unless it has specifically been prescribed by your GP. It is also advisable to avoid other non-steroidal anti-inflammatory drugs like 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 acceptable, although be aware that some paracetamol 'plus' products contain aspirin.

### Diet

It is important to eat a well balanced diet.

Consult your doctor or practice nurse if you need to diet to lose weight.

Any major changes in your diet may affect how your body responds to your anticoagulant medication.

Foods rich in vitamin K may affect your INR result. Such foods include green leafy vegetables, chick peas, liver, egg yolks, cereals containing wheat bran and oats, mature cheese, blue cheese, avocado and olive oil. These foods are important in your diet but eating them in large amounts may lower your INR result. Try to take the same amount of these foods on a regular basis. It is the change in the vitamin K intake that affects your INR result. Drinking cranberry juice can also affect your INR and so should be avoided altogether if possible.

If your diet changes greatly over a seven-day period, you should have an INR test.

## Alcohol

It is recommended that you do not exceed the national guidelines. These are up to three units a day for men, and up to two units a day for women. 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.

**It is dangerous to 'binge drink' while taking anticoagulants.**

## Pregnancy

Oral anticoagulants can affect the development of a baby in early pregnancy. Women who are on 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 on warfarin should seek a pregnancy test as soon as possible and, if this is positive, an urgent appointment with a doctor. You may breast feed while taking anticoagulant medication.

## 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.

## 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.

