

Notes for patients on Anticoagulant Therapy

United Bristol Healthcare
Patient Information Service



NHS Trust

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You are being treated with a medicine to try to prevent blood clots - the process which is called thrombosis. Medicines which have this action are known as anticoagulants.

For treatment to be successful it is necessary to adjust the dose of your anticoagulant medicine carefully so that you are receiving the right amount. If you receive too little then the blood is still liable to clot abnormally. If you receive too much then the clotting power of your blood may become so low that you could bleed.

In order that the correct dose can be prescribed for you, it is necessary for you to have blood tests done at intervals. If this treatment is to be successful it is essential that you:

- ✓ **take the exact dose that is prescribed for you,**
- ✓ **take it regularly,**
- ✓ **do not miss doses,**
- ✓ **attend for blood tests when asked to do so.**

Provided that you keep a few simple rules, anticoagulants have relatively few side effects and patients can take them for many years and lead a normal life.

Some patients do find treatment with anticoagulant medicines rather confusing and the following notes are designed to try and answer the sort of questions that patients frequently ask.

What shall I do if I have problems?

If you wish to cancel your appointment, or to make an alternative one, please ring the Appointments Desk at the BRI:

0117 342 0280.

You should also ring this number if you have any queries about transport. Do not ring the Department of Haematology with this sort of enquiry. Your letter should be returned to you by first class post. It will usually arrive two to three days after a blood test. The pharmacist will call by telephone if they need to discuss your dosage with you. **Please ensure the address and phone number on your sheet are up to date.**

If you have not received your anticoagulant letter in the post by the fourth day after a blood test, or if you are unclear what dose you should be taking, please telephone the helpline:

0117 928 3874.

(The answerphone messages are dealt with every couple of hours.)

ⓘ Please do not make telephone enquiries unless absolutely necessary. If you have any problem about your general health you should consult your General Practitioner and not the hospital.

What about holidays?

Provided that your anticoagulants are well controlled and stable there is no problem about you going on holiday.

For short periods it will not be necessary for you to have a blood test while you are away and you can carry on as normal. If you develop any complications such as unexplained bleeding, you must seek medical help locally.

If you are going away for a longer period - i.e. over a month, then it may be necessary for you to have a blood test done whilst you are away. There is usually no problem about this in the United Kingdom as all District General Hospitals have anticoagulant clinics. Advice about how to contact these and an introductory letter can be arranged if you mention this fact when you attend the Anticoagulant Clinic.

Remember, that if you have to have blood tests done or require medical attention abroad, it may involve you in considerable expense unless you are adequately insured. You should check this before you leave for holiday. It is important also to avoid marked changes in diet or in alcohol consumption.

What shall I do if I have problems?

These remarks apply only to those patients attending the Anticoagulant Clinics at the Bristol Royal Infirmary run by the Departments of Haematology and Pharmacy. Please also read the information contained in the leaflet with your tablets and the yellow anticoagulant therapy record booklet.

Which anticoagulant medicine will I be taking?

There are several types of anticoagulant medicine, the one which you are most likely to be given is called Warfarin. (The trade name for this is Marevan). Some patients may not be treated with warfarin but with alternatives called phenindione (trade name Dindevan) or acenocoumarol (formerly called nicoumalone, trade name Sinthrome). There are four strengths of warfarin tablets.

Warfarin 5 mg are PINK

Warfarin 3 mg are BLUE

Warfarin 1 mg are pale BROWN

Warfarin 0.5 mg or ½mg are WHITE

The amount of Warfarin required by different people varies widely.

You will be told your dose and it will be printed on your anticoagulant letter. Provided that you know the strength of the tablets you have, you can use any combination to make up the right dose. If you do not have any white 0.5mg (1/2mg) tablets, then you can break a 1mg (brown tablet) along the scored line. One half of the brown warfarin tablet contains 0.5mg (1/2mg) of warfarin.

- ① **If you are in any doubt whatsoever about the number and strength of the tablets you should be taking, then you must check with the anticoagulant pharmacist.**
- ① **Do not alter your dosage except on the instruction of a doctor or Anticoagulant Clinic pharmacist.**

What about operations?

① You should take your total daily dose of Warfarin at one time, and not spread them out through the day. You should take your Warfarin at the same time each day.

Patients are usually recommended to take their tablets at 6.00 p.m. but if this is inconvenient they can be taken at any other time during the day provided that it is roughly the same time each day.

① If you accidentally miss one day's dose - Do not double the dose on the following day.

If you have difficulty in remembering whether you have taken tablets, or if you are taking different doses on different days, then it is advisable to keep a calendar to record the fact that you have taken your tablets by putting a line through each date on the calendar as soon as you have taken the tablets.

① Always keep a sufficient supply of tablets so that you do not run out of them.

It is advisable to keep a supply of tablets of different strengths in case your dose is altered. Warfarin tablets can be kept quite safely for several months.

Please note also that the only drugs which will be prescribed at the anticoagulant clinic are anticoagulants, and that as far as possible you should obtain your supply of these from your GP. Supplies of all other medicines, e.g. Digoxin, etc., must be obtained from your GP.

It is possible for you to have surgical operations carried out whilst you are taking anticoagulants, but the dose will need to be adjusted. Your doctor might advise you to stop your anticoagulant for a number of days.

It is essential that if you consult any surgeon, including a dental surgeon, you should tell them that you are on anticoagulants and show them your yellow treatment card and/or last anticoagulant letter. Never assume that the doctor attending you knows or remembers that you are on anticoagulants.

Carry your yellow treatment card with you at all times. It is important to remember that you could be involved in an accident at any time and perhaps arrive unconscious at a hospital. Unless you are carrying your anticoagulant card the doctors at the hospital will not know you are on this treatment.

Are there any harmful side effects of anticoagulant medicines?

On the whole, there are very few side effects associated with warfarin and long-term treatment should produce no noticeable effect. You must expect to bruise more easily and cuts may take longer to stop bleeding when you take anticoagulants. Anticoagulants can cause bleeding if you are receiving too high a dose.

Inform your doctor immediately if you have symptoms of:

- Prolonged bleeding from cuts
- Bleeding that does not stop by itself
- Nose bleeds
- Bleeding gums
- Red or dark brown urine
- Red or black bowel motions
- For women, vaginal bleeding or increased blood flow during menstrual periods
- Severe unexplained bruising

These complications are not uncommon but are not usually serious. You should also contact your doctor or the warfarin clinic in the event of any illness such as fever, influenza, vomiting, diarrhoea, loss of appetite or jaundice. Under these circumstances the dose of warfarin may need to be adjusted.

How long will I need to stay on Anticoagulants?

This will depend on the reason why you have been started on this treatment. Your doctor will tell you how long you are likely to need anticoagulants. Some patients need only a short course of treatment - i.e. up to three months, but others, especially those with heart disease, and who have had an artificial heart valve fitted will need to stay on it for the rest of their life.

ⓘ You should not stop taking your tablets unless instructed to do so by a doctor. It may be dangerous to stop taking the tablets suddenly and usually you will be instructed to reduce the dose gradually over a period of two weeks.

Why do I need to have blood tests and how often will I need them?

You need to have blood tests done to measure the clotting power of your blood. At the beginning of treatment you will need to have blood tests done frequently in order to adjust your dose.

Once your dose has become stabilised you will need to have tests done less frequently. Some patients who are very stable need to have tests only once every eight weeks, others need to have tests done more frequently than this. Because patients response to anticoagulants varies it is not possible to tell you at the beginning of treatment how frequently you will need to have a blood test done.

Is warfarin affected by other medicines that I take?

We will check for any interactions when you start treatment with anticoagulants.

If you are to start taking any new medicines prescribed by your doctor or want to buy medicines from the chemist, including herbal medicines and vitamins, then please remind the doctor or pharmacist that you take anticoagulants.

Why is it necessary to adjust the amount of anticoagulant medicines from time to time?

The amount of Warfarin necessary to reduce the clotting power of your blood to the required level depends upon a number of factors - such as your general state of health, your diet and any other tablets that you may be taking. As far as possible maintain a stable routine in your life. In particular avoid wide variations in your diet. Eat similar quantities of fruit and vegetables each day.

Can I drink while taking anticoagulants?

You may drink a small amount of alcohol if you wish. Avoid excessive changes in your daily intake of alcohol. We recommend a maximum of 2 units of alcohol daily. 1 unit of alcohol is contained in a half pint of beer, a small glass of wine or a pub measure of spirits. Binge drinking whilst taking anticoagulants is dangerous as it can lead to an increased risk of bleeding.

Cranberry juice and cranberry products

ⓘ Patients should not take cranberry juice drinks or products containing cranberry while taking warfarin.