

How does alcohol affect anticoagulation?

Alcohol increases the effect of warfarin. If you drink a small amount of alcohol on a regular basis, it is usually possible to adjust your warfarin dose to allow for this. Drinking large amounts of alcohol usually results in an increased INR and a significantly increased risk of bleeding.

Should I follow a special diet?

It is important that you eat a balanced diet that includes foods from all the major food groups. No food should be excluded from your diet. The amount of vitamin K in your diet can affect the warfarin dose. These include leafy green vegetables, such as lettuce, broccoli, cabbage, spinach, alfalfa, and oils including olive, soybean and canola. If you eat a regular, consistent amount of these foods your warfarin dose can be adjusted to allow for this. You should avoid drastic changes in your diet, especially eating excessive amounts of leafy green vegetables or bingeing on particular foods.

Is it okay to exercise?

Yes, exercise is encouraged, although changes to your activity level should be gradual. If you experience any ill effects including pain, shortness of breath or dizziness you should consult your doctor.

Are there any sports or activities I should avoid?

Anticoagulant drugs thin the blood, thus making it more likely that you will bruise or bleed if you are injured. Activities to be avoided include contact sports, e.g., football, boxing, and those with potential for traumatic injury. Normal sexual activity will not usually cause problems.

What if I miss a dose?

If you remember within 6 hours, then take the dose on the same day. If you are unsure or remember after this time, then take your normal dose the next day. Do not take a double dose in order to make up for a missed dose.

What should I do if I am pregnant?

It is extremely important that you notify your doctor immediately. Warfarin and other oral anticoagulant drugs can cause abnormalities in the baby if taken early in the pregnancy. Alternative anticoagulation is required and usually given by injection during pregnancy. After the baby is born, warfarin can be taken even if breastfeeding.

What if I need surgery or dental work?

It is most important that you tell the person doing the surgery or dental work that you are on an anticoagulant. The doctor looking after your warfarin should also be told about the procedure before it proceeds. Your doctor or dentist will tell you whether the warfarin dose needs to be stopped or changed.



For further information, please speak with your doctor

As this brochure contains only general information, professional advice from your medical practitioner should be sought before applying the information in this brochure to particular circumstances. You should not rely on any information contained in this brochure without first obtaining professional advice. Prices are correct at time of printing and are subject to change without notice.



Warfarin Therapy



What is anticoagulant treatment for?

Anticoagulant drugs are used to decrease the clotting ability of the blood in order to prevent thrombosis (formation of a blood clot). Bleeding can be a potential risk when using these drugs and care must be taken to avoid thinning the blood to a degree that results in spontaneous bleeding.

What types of oral anticoagulants are there?

Warfarin is the most commonly used oral anticoagulant. It is taken once a day. There are two brands of warfarin - Marevan and Coumadin. A less commonly used drug is Dindevan, which is taken twice daily. Where the term 'warfarin' is used in this pamphlet, the information also applies to Dindevan.

What happens when I start treatment?

The doctor managing your warfarin will advise you what dose to take. You will require blood tests to check the effect of warfarin on your blood. At first, the blood tests will be done every second or third day. When the blood level is stable, the interval between tests is progressively increased to weekly, fortnightly and then longer intervals. You will require regular testing as long as you remain on the anticoagulant drug.

How will the warfarin be stopped?

Your doctor will advise you how to stop your warfarin. Some doctors reduce the dosage slowly over a few days. Others prefer to stop it without a gradual weaning of the dose. Both ways are considered safe.

My test result is given as an INR - what is this?

The INR (International Normalised Ratio) is a measure of the level of anticoagulation in your blood. It is calculated in a way that allows results from different laboratories to be compared. Most laboratories around the world report oral anticoagulant results as an INR. This means that if you are tested by another laboratory, e.g., when on holiday, the result will be the same as if it were done by QML Pathology.

How can I help my doctor to manage my anticoagulant treatment?

You should take the exact dose of warfarin prescribed at the same time every day. Most people take their warfarin in the evening, however, some may find it easier in the morning. Dindevan is taken twice daily - morning and evening. It is most important that you always take the same brand of warfarin - either Marevan or Coumadin. You must not mix brands. You should be well informed about your treatment including why you are on it, the possible side effects and what can cause your blood levels to go up or down. Your doctor will be able to assist with any questions you may have. You should also inform the doctor looking after your warfarin of any changes in your health, medication or lifestyle. Communication and cooperation are vital for good management.

What side effects can occur?

The most serious side effect of warfarin is bleeding. This bleeding may be obvious, for example a nose bleed, bleeding from cuts or from gums, bruising, red or dark brown urine, red streaked or black bowel motions or heavy periods. However, bleeding in deeper tissues can be harder to identify and may present as pain, swelling, severe or persistent headaches, dizziness or weakness. You should contact your doctor if any of these signs or symptoms occur. Other side effects of warfarin include skin rashes, jaundice, nausea, vomiting, diarrhoea, hair loss and an unusual disorder which causes a purple discolouration of the toes. These side effects are uncommon and you should see your doctor if they occur.

What can affect my anticoagulant levels?

Many things can affect your anticoagulant level, with the most common being changes in medication. Other factors can include changes in diet, exercise level, weight loss or gain, increased stress, alcohol use and travel. It is important that the doctor controlling your warfarin is aware of any recent changes to your lifestyle.

Which medications could affect my treatment?

There are a large number of prescription drugs that can affect your anticoagulant level. In addition, herbal treatments, vitamins, non-prescription medicines and linaments may also cause an affect. If you begin any new medications you should inform the doctor adjusting your warfarin dose, as it may be necessary for extra blood tests and/or a change in your warfarin dose.

Drugs that commonly cause problems are:

- Antibiotics
- Pain killers, e.g., medications containing paracetamol or aspirin and arthritis medications
- Treatments for peptic ulcer or reflux oesophagitis
- Drugs that lower blood cholesterol and lipid levels
- Steroids, e.g., prednisone
- Chemotherapy (anti-cancer drugs)
- Gout treatment
- Flu vaccine
- Hormone therapy, e.g., contraceptive pills, HRT
- Anticonvulsants
- Herbal preparations
- Vitamins
- Linaments or creams.