

Warfarin



WHAT IS WARFARIN?

Warfarin is a medicine, taken in tablet form, once per day. There are two brands of warfarin – Marevan and Coumadin. (There is a less commonly used medicine called Dindevan, which is taken twice daily.) The information in this pamphlet applies to all three medicines (i.e., Marevan, Coumadin and Dindevan). It is important that you always take the same brand of warfarin. You must not mix brands. Make sure you always have enough medicine, so that you don't run out.

WHAT DOES WARFARIN DO?

Warfarin is a type of blood thinning medicine known as an anticoagulant (anti-clotting). These types of medicines lengthen the time it takes for your body to form a blood clot. This lowers the risk of harmful blood clots forming that can cause a stroke or a blockage in the lungs or a vein. Bleeding can be a potential risk when taking this medicine. Care must be taken to avoid thinning the blood to a degree that results in spontaneous bleeding. You will require regular blood testing (monitoring) as long as you remain on warfarin.

HOW MUCH WARFARIN DO I NEED TO TAKE?

The doctor managing your warfarin will advise you what dose to take. Your doctor might choose to enrol you in QML Pathology's Warfarin Clinic to monitor your blood and keep your warfarin dosage at a safe level.

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.

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 IF I WANT TO STOP TAKING WARFARIN?

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.

HOW WILL I KNOW I HAVE THE RIGHT DOSE OF WARFARIN?

You will require blood tests to check how well warfarin is working. At first, the blood tests will be done every second or third day. When the blood level is stable, the frequency of testing will reduce to weekly, fortnightly and then longer intervals. **You will require regular testing as long as you remain on warfarin.**

WHAT DOES THE BLOOD TEST MEASURE?

The blood test result is given as an INR (International Normalised Ratio). This is a measure of the time it takes for your blood to clot. The higher the INR, the longer it will take your blood to clot (which means you are at a higher risk of bleeding). The lower the INR, the more likely it is that you will develop a clot. The goal is to find the right dose of warfarin for you, so that your INR result is kept within the target range. Your individual target range is determined by your reason for taking warfarin and other health factors. Your doctor (or the QML Pathology Warfarin Clinic) will use your INR result to adjust your dose of warfarin.

WHAT CAN AFFECT MY INR?

Many things can affect your INR. The most common being changes in the medicines that you take. Changes in diet, exercise level, weight loss or gain, increased stress, alcohol use and travel can also affect your INR. It is important that the doctor controlling your warfarin is aware of any recent changes to your lifestyle.

WHICH MEDICINES COULD AFFECT MY TREATMENT?

Warfarin interacts with many types of prescription medicines as well as herbal treatments, vitamins, over-the-counter medicines and liniments. Your doctor will need to know about every medicine or treatment that you are using. If you begin or stop any new medicine or treatment, you should inform the doctor controlling your warfarin dose, as it may be necessary for extra blood tests and/or a change in your warfarin dose.

CAN I DRINK ALCOHOL?

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 will significantly increase your 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. But the amount of vitamin K in your diet can affect the warfarin dose. Foods that contain vitamin K include leafy green vegetables, such as lettuce, broccoli, cabbage, spinach, alfalfa and oils including olive, soybean and canola. You can eat green leafy vegetables, but it is important to eat the same amount of these foods each week to help keep your INR stable. 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.

SHOULD I AVOID CERTAIN ACTIVITIES?

Warfarin thins 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 SHOULD I DO IF I AM PREGNANT?

It is extremely important that you notify your doctor immediately. Warfarin can cause abnormalities in the baby if taken early in the pregnancy. Alternative medicine is required and is 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 warfarin. 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.

WHAT SIDE EFFECTS CAN OCCUR?

It is important to speak with your doctor to ensure you fully understand the impact of taking warfarin. 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 tissue can be harder to identify and may present as pain, swelling or 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.

**For further information,
please speak with your doctor.**

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