

Blood Thinner Pills: Your Guide to Using Them Safely



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About Your Blood Thinner

Your doctor has prescribed a medicine called a blood thinner to prevent blood clots. Blood clots can put you at risk for heart attack, stroke, and other serious medical problems. A blood thinner is a kind of drug called an anticoagulant (*an te-ko-AG-u-lent*). “Anti” means against and “coagulant” means to thicken into a gel or solid.

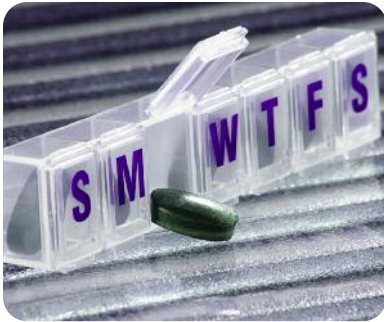
Blood thinner drugs work well when they are used correctly. To help you learn about your medicine, your doctor has given you this booklet to read. Depending on where

you receive care, you may be seen by a doctor, nurse, physician's assistant, nurse practitioner, pharmacist, or other health care professional. The term “doctor” is used in this booklet to refer to the person who helps you manage your blood thinner medicine.

You and your doctor will work together as a team to make sure that taking your blood thinner does not stop you from living well and safely. The information in this booklet will help you understand why you are taking a blood thinner and how to keep yourself healthy. Please take time to read all of the information in this booklet.

Warning!

Tell your doctor if you are pregnant or plan to get pregnant. Many blood thinners can cause birth defects or bleeding that may harm your unborn child.



How to Take Your Blood Thinner

Always take your blood thinner as directed. For example, some blood thinners need to be taken at the same time of day, every day.

Never skip a dose, and never take a double dose.

If you miss a dose, take it as soon as you remember. If you don't remember until the next day, call your doctor for instructions. If this happens when your doctor is not available, skip the missed dose and start again the next day. Mark the missed dose in a diary or on a calendar.

A pillbox with a slot for each day may help you keep track of your medicines.

Check Your Medicine

Check your medicine when you get it from the pharmacy.

- Does the medicine seem different from what your doctor prescribed or look different from what you expected?
- Does your pill look different from what you used before?
- Are the color, shape, and markings on the pill the same as what you were previously given?



If something seems different, ask the pharmacist to double check it. Many medication errors are found by patients.



Using Other Medicines

Tell your doctor about every medicine you take. The doctor needs to know about all your medicines, including medicines you were taking before you started taking a blood thinner.

Other medicines can change the way your blood thinner works. Your blood thinner can also change the way your other medicines work.

It is very important to talk with your doctor about all the medicines that you take, including other prescription medicines, over-the-counter medicines, vitamins, and herbal products.

Products that contain aspirin may lessen the blood's ability to form clots and may increase your risk of bleeding when you also are taking a blood thinner. Talk with your doctor about whether or not you should take aspirin and which dose is right for you.

Medicines you get over the counter may also interact with your blood thinner. Following is a list of some common medicines that you should talk with your doctor or pharmacist about before using.

Pain relievers, cold medicines, or stomach remedies, such as:

- Advil®
- Aleve®
- Alka-Seltzer®
- Excedrin®
- ex-lax®
- Midol®
- Motrin®
- Nuprin®
- Pamprin HB®
- Pepto Bismol®
- Sine-Off®
- Tagamet HB®
- Tylenol®

Vitamins and herbal products, such as:

- Centrum®, One a Day®, or other multivitamins
- Garlic
- Ginkgo biloba
- Green tea

Tell your doctor about all your medicines.

Always tell your doctor about all the medicines you are taking. Tell your doctor when you start taking new medicine, when you stop taking a medicine, and if the amount of medicine you are taking changes. When you visit your doctor, bring a list of current medicines, over-the-counter drugs—such as aspirin—and any vitamins and herbal products you take.



Possible Side Effects

When taking a blood thinner it is important to be aware of its possible side effects. Bleeding is the most common side effect.

Call your doctor immediately if you have any of the following signs of serious bleeding:

- Menstrual bleeding that is much heavier than normal.
- Red or brown urine.
- Bowel movements that are red or look like tar.
- Bleeding from the gums or nose that does not stop quickly.
- Vomit that is brown or bright red.
- Anything red in color that you cough up.
- Severe pain, such as a headache or stomachache.
- Unusual bruising.
- A cut that does not stop bleeding.
- A serious fall or bump on the head.
- Dizziness or weakness.

Some people who take a blood thinner may experience hair loss or skin rashes, but this is rare.



Stay Safe While Taking Your Blood Thinner

Call your doctor and go to the hospital immediately if you have had a bad fall or a hard bump, even if you are not bleeding. You can be bleeding but not see any blood. For example, if you fall and hit your head, bleeding can occur inside your skull. Or, if you hurt your arm during a fall and then notice a large purple bruise, this means you are bleeding under your skin.

Because you are taking a blood thinner, you should try not to hurt yourself and cause bleeding. You need to be careful when you use knives, scissors, razors, or any sharp object that can make you bleed.

You also need to avoid activities and sports that could cause injury. Swimming and walking are safe activities. If you would like to start a new activity that will increase the amount of exercise you get every day, talk to your doctor.

You can still do many things that you enjoy. If you like to work in the yard, you still can. Just be sure to wear sturdy shoes and gloves to protect yourself. Or, if you like to ride your bike, be sure you wear a helmet.

Tell others.

Keep a current list of all the medicines you take. Ask your doctor about whether you should wear a medical alert bracelet or necklace. If you are badly injured and unable to speak, the bracelet lets health care workers know that you are taking a blood thinner.



To prevent injury indoors:

- Be very careful using knives and scissors.
- Use an electric razor.
- Use a soft toothbrush.
- Use waxed dental floss.
- Do not use toothpicks.
- Wear shoes or non-skid slippers in the house.
- Be careful when you trim your toenails.
- Do not trim corns or calluses yourself.



To prevent injury outdoors:

- Always wear shoes.
- Wear gloves when using sharp tools.
- Avoid activities and sports that can easily hurt you.
- Wear gardening gloves when doing yard work.

Food and Your Blood Thinner

The foods you eat can affect how well your blood thinner works for you. High amounts of vitamin K might work against some blood thinners, like warfarin (Coumadin[®], *COU-ma-din*). Other blood thinners are not affected by vitamin K. Ask your doctor if you need to pay attention to the amount of vitamin K you eat.

Examples of some foods that contain medium to high levels of vitamin K and can affect how your blood thinner work are:

- | | |
|--------------------|----------------|
| ■ Asparagus | ■ Canola oil |
| ■ Avocado | ■ Cranberries |
| ■ Broccoli | ■ Endive |
| ■ Brussels sprouts | ■ Green onions |
| ■ Cabbage | ■ Kale |

- Lettuce
- Liver
- Margarine
- Mayonnaise
- Parsley
- Soybean oil
- Soybeans
- Spinach
- Turnip, collard, and mustard greens

Call your doctor if you are unable to eat for several days, for whatever reason. Also call if you have stomach problems, vomiting, or diarrhea that lasts more than 1 day. These problems could affect your blood thinner dose.

Alcohol. If you are taking a blood thinner, you should avoid drinking alcohol.

Keep your diet the same.

Do not make any major changes in your diet or start a weight loss plan before calling your doctor first.



Talk to Your Other Doctors

Because you take a blood thinner, you will be seen regularly by the doctor who prescribed the medicine. You may also see other doctors for different problems. When you see other doctors, it is very important that you tell them you are taking a blood thinner. You should also tell your dentist and the person who cleans your teeth.

If you use different pharmacies, make sure each pharmacist knows that you take a blood thinner.

Blood thinners can interact with medicines and treatments that other doctors might prescribe for you. If another doctor orders a new medicine for you, tell the doctor who ordered your blood thinner because dose changes for your blood thinner may be needed.

Blood Tests

You might have to have your blood tested often if you are taking a blood thinner. The blood test helps your doctor decide how much medicine you need.

The International Normalized Ratio (INR) blood test measures how fast your blood clots and lets the doctor know if your dose needs to be changed. Testing your blood helps your doctor keep you in a safe range. If there is too much blood thinner in your body, you could bleed too much. If there is not enough, you could get a blood clot.

Too Little	Best Range	Too Much
<i>May cause a blood clot</i>		<i>May cause bleeding</i>

Once the blood test is in the target range and the correct dose is reached, this test is done less often. Because your dose is based on the INR blood test, it is very important that you get your blood tested on the date and at the time that you are told.

Illness can affect your INR blood test and your blood thinner dose. If you become sick with a fever, the flu, or an infection, call your doctor. Also call if you have diarrhea or vomiting lasting more than 1 day.

Important reminders:

- Take your blood thinner as directed by your doctor.
- Go for blood tests as directed.
- Never skip a dose.
- Never take a double dose.



My INR blood test range is:

I should get my blood tested at:

Phone: _____

Common Medical Conditions

If you have any of the following medical conditions or are at risk for having them, your doctor may have given you a prescription for a blood thinner. A blood thinner helps your blood flow more easily and lowers your risk for developing blood clots in your body.

Atrial fibrillation. Atrial fibrillation (*A-tre-al fi-bri-LA-shun*), a type of irregular heartbeat, is a fairly common heart disorder that you may or may not feel. Sometimes your heart will beat too fast or out of rhythm and may cause blood clots. Sometimes atrial fibrillation is also called A-fib.

Blood clots in the lung. A blood clot that forms in another part of your body, such as in your leg, can break loose and move through the blood to your lungs. The clot then gets stuck within a blood vessel that brings blood to the lungs (called a pulmonary embolism, *PULL-mun-ary EM-bo-lizm*). If the lungs cannot get enough blood, they will be damaged, and you could stop breathing.

Blood clots. Blood clots (DVT, deep vein thrombosis, *throm-BO-sis*) form in a vein. The veins deep inside your leg, especially the calf and thigh, are the most common areas where clots occur. Blood clots can lead to damage of the blood vessels in your leg and break loose and cause other organ damage.

Family history. Some people are more likely to get blood clots because of a family history. You may have a genetic condition that causes your blood to form potentially dangerous clots.

Heart attack. A heart attack is caused by a lack of blood supply to the heart. The lack of blood happens when one or more of the blood vessels pumping blood to the heart are blocked.

Heart valve disease. Heart valve disease is any problem in one or more of the four valves in the heart. Heart valves keep blood flowing in one direction. They act as a door that swings open, allowing blood to flow through the sections of the heart.

Heart valve replacement. There are many types of artificial valves that are used to replace your own heart valve. The material used to make these valves may cause blood to stick and form clots.

Stroke. A stroke is caused by a blood clot that blocks a blood vessel in the brain. This blockage cuts off the blood flow to a part of the brain and can cause problems with your speech, swallowing, or movement of different parts of your body. You may be at a higher risk for a stroke if you've had a heart attack.

This booklet is based on a product developed by Carla Huber, A.R.N.P., M.S., Cedar Rapids Community Anticoagulation Clinic, Cedar Rapids, Iowa (chuber@pcofiowa.com), under Agency for Healthcare Research and Quality (AHRQ) Grant No. 1 U18 HSO15830-01 to Kirkwood Community College.

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