

Atrial Fibrillation and Anticoagulants: Know Your Risks

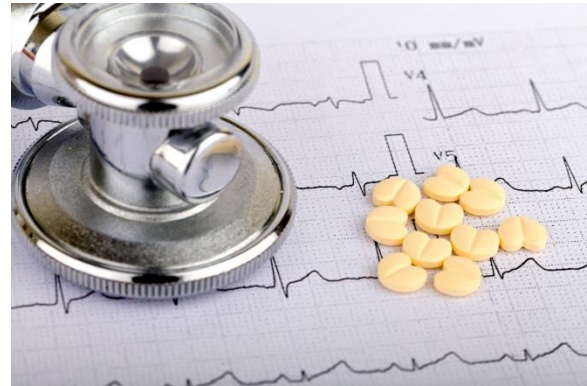
When you have Atrial Fibrillation or AFib, your risk of stroke increases. The condition causes blood to pool in the atria, the heart's upper chambers, due to an irregular heartbeat. These pools increase the risk of blood clots that can cause a stroke. The most common medication used to manage AFib is an anticoagulant.

How do anticoagulants help?

Anticoagulants work by altering the body's ability to regulate clotting. Some anticoagulants prevent the function of Vitamin K while others inhibit the functioning of thrombin or activated factor X (Xa). By reducing the ability for blood clots to form, anticoagulants under certain medical circumstances (e.g., presence of AFib) decrease the risk of stroke. Anticoagulation therapy with warfarin for patients with AFib can reduce stroke risk by approximately 68%.

What are the possible side effects of anticoagulants?

Anticoagulants are typically prescribed because their benefits are greater than the risk of taking them. Still, anticoagulants can be associated with nausea, loss of



appetite, or stomach or abdominal pain. Other side effects can include rash, bloating, or diarrhea. The side effect of greatest concern associated with anticoagulants is bleeding.

What do I need to know about bleeding risk?

Blood clotting is a natural way the body protects itself when blood vessels are damaged. Anticoagulants alter one's clotting ability. In doing so, they act as "blood thinners," affecting the ability of the blood to clot.

This means it can be more difficult to stop bleeding if you get a cut. The primary danger is fatal bleeding after an injury, or internal bleeding. Fatal bleeding may be prevented by healthcare providers administering reversal agents, or medication that temporarily stops the effects of the anti-coagulation

medicine. Available reversal agents are specific to the anti-coagulant medicine.

How can I control the risk for bleeding?

With proper care, it is possible to manage this risk of bleeding and continue to reap the benefits of taking anticoagulants – reducing your risk of stroke.

Awareness. The most important thing you can do is be aware of the side effects of the medication. Tell your doctors and dentists if you're on an anticoagulant, and know the name of your specific anti-coagulant medication. And wear a medical ID bracelet to let people know you take an anticoagulant medicine and thus, have an increased risk of bleeding.

Blood tests. Also, make and keep monthly appointments to monitor the effect of the medication. . A Prothrombin time (PT) blood test measures the effect of warfarin-type oral anticoagulants on a scale called the International Normalized Ratio (INR). Your INR should be between 2.0 and 3.0, but the range may be higher or lower depending on the clinical circumstances and your doctor's recommendations. If it's less than 2.0, your current dose of warfarin may be too low, the drug may not

effectively prevent clot formation, and your doctor may need to adjust the dose. If it's above 3.0, you may be at risk of bleeding and are in need of a lower warfarin dose.

Safety. It's also important to control your bleeding risk by prevention of cuts and nicks to the skin. Use caution when taking part in activities and sports. Wear gloves when using knives, gardening, or cooking. Keep bandages and first-aid supplies on hand. Wear a helmet if there's any chance you could fall and injure your head.

Diet. Finally, Vitamin K containing foods can affect the effectiveness of warfarin-type oral anticoagulants. Vitamin K can be found in green leafy vegetables and also olives, olive oil, and some nuts and legumes. Try to eat a constant amount of Vitamin K daily and at the same times every day, and take your medication at regular, consistent times as well.

Are there other options?

Anticoagulants remain one of the best ways to prevent clotting and reduce the risk of stroke for people with AFib. There are a number of new oral anticoagulants with different mechanisms of action than warfarin. Some for example, are direct thrombin inhibitors in the

clotting system and others are factor Xa inhibitors. Your doctor can advise whether alternative treatments are available and whether they would be an effective option. Reversal agents may be available for these newer agents. The effect of warfarin may be reversed by administration of Vitamin K dependent clotting factors.

Additional Resources:

For additional resources for treating atrial fibrillation, visit www.stopafib.org.

For more information about way to reduce your risk of stroke, visit National Stroke Association. www.stroke.org

Note: This fact sheet is compiled from general, publicly available information and should not be considered recommended treatment for any particular individual. You should consult your provider about any personal medical concerns.

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