

Medicines Awareness

for care homes

Warfarin



Warfarin is part of a group of medicines known as Anticoagulants.

What are Anticoagulants?

An anticoagulant is a medicine that stops blood clotting.

Clotting (thickening) is a complex process involving a number of substances called clotting factors. Clotting factors are produced by the liver and help control bleeding. They work with cells that trigger the clotting process (platelets) to ensure blood clots effectively. To produce some of the clotting factors, the liver needs a good supply of vitamin K.

Warfarin blocks one of the enzymes (proteins) that uses vitamin K to produce clotting factors. This disrupts the clotting process, making it take longer for the blood to clot.

A blood test called an INR (International Normalised Ratio) is required to measure how long it takes for the patient's blood to begin to form clots. This result is then used to adjust the warfarin dose accordingly.

Anticoagulant drugs

The most commonly prescribed anticoagulant is **Warfarin** however, newer types of anticoagulants are also available and are becoming increasingly common. These include:

- rivaroxaban (Xarelto)
- dabigatran (Pradaxa)
- apixaban (Eliquis)
- edoxaban (Lixiana)

Warfarin and the newer alternatives are taken as tablets or capsules. There's also an anticoagulant called **heparin** that can be given by injection.

The newer types of anticoagulant do not require the same blood testing regime as warfarin.

Rivaroxaban, Apixaban and Edoxaban are safe to be put into a monitored dosage system but Dabigatran is moisture sensitive and cannot be used in standard monitored dosage systems.

What are anticoagulants used for?

Anticoagulant medicines, such as warfarin, are often prescribed for people who've had a condition caused by a blood clot, such as:

- a stroke
- a heart attack
- deep vein thrombosis – a blood clot within a deep vein in the body, usually in a leg
- pulmonary embolism – a blood clot in the lungs

Warfarin may also be prescribed for people at an increased risk of developing harmful blood clots, such as those with:

- a replacement or mechanical (prosthetic) heart valve
- an irregular heart rhythm, known as atrial fibrillation
- a blood clotting disorder, such as thrombophilia
- an increased risk of blood clots following surgery

Risks associated with Warfarin

- May cause excessive bleeding
- Alcohol may increase the effect of the drug, and increase the risk of bleeding.
- Excessive intake of salads and leafy green vegetables may interfere with the way the warfarin works as these foods contain large amounts of Vitamin K
- Cranberry juice potentially increases the anticoagulant effect of warfarin. Manufacturer advises avoid.

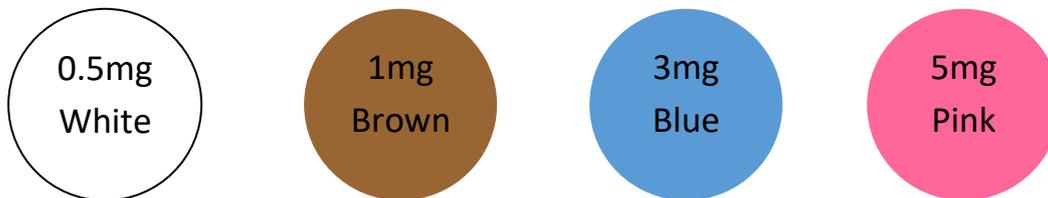
Actions for Care Staff

- Staff that administer medication should receive adequate training regarding warfarin to enable them to undertake their duties safely.
- Ensure INR (International Normalised Ratio) is monitored regularly as advised by the doctor.
- Care homes must clearly record in the diary when the next INR blood test is required. It is vital the resident has their blood test on the specified date.
- Ensure the yellow anticoagulant book is sent to the GP when requesting a repeat or a new prescription in order to ensure the right Warfarin dose is prescribed.
- All communication regarding INR results should be kept with the yellow book.
- Warfarin should be administered from the original pack and not included in a Monitored Dosage System
- All warfarin dose changes must be confirmed by the prescriber in writing
- The dose of warfarin intended for the resident must be clearly stated on the MAR sheet.
- Ensure the dose in milligrams (mg) of warfarin is stated on the MAR sheet, not the number of tablets.
- Always inform the dentist that warfarin is being taken before any procedure

- Consult the doctor immediately if the patient;
 - suffers from a rash after taking Warfarin.
 - passes blood in their urine or faeces
 - has severe bruising
 - has long nosebleeds – lasting more than 10 minutes
 - has bleeding gums
 - coughs up blood or has blood in their vomit

Administration

Warfarin tablets have different colours depending on their strength.



- The least number of tablets required to provide the specific dose of warfarin should be administered.
- Warfarin should be administered at the same time each day; this is often around 6pm to ensure that any change in dose following a blood test can be communicated.
- Avoiding breaking tablets in half. There is a 500microgram (0.5mg) tablet available.
- Ensure all staff are aware of the potential for error surrounding 500microgram and 5mg tablets.

**For further advice, please contact the medicines management team at Walsall CCG
Tel. 01922 618388**