The Anticoagulant Clinic at the Royal Berkshire Hospital

Information for patients
This booklet has been given to you because you have started to take a medicine known as an anticoagulant.

In addition you will receive a letter containing an Anticoagulant Alert Card. Push the card out of the letter and it should be carried with you at all times. This card says that you are taking an anticoagulant and the information given on the card may be important in an emergency. If you lose the card or if it becomes damaged, then please contact the clinic on 0118 322 7691 and we will send you a new one.

**What are anticoagulants and how do they work?**
Anticoagulants are a class of medication (which includes Warfarin) that work to prolong the coagulation (clotting) time of the blood. This reduces the risk of harmful blood clots forming in your circulation system (blood vessels).

**How long will I need to take the anticoagulants for?**
The length of time will depend on the condition requiring treatment with an anticoagulant. Your doctor will usually advise on the duration at the start of your treatment. Some patients require treatment for a few months; others will need this indefinitely.

**What do anticoagulant tablets look like?**
There are many anticoagulant tablets that can be prescribed by your doctor. Warfarin is an anticoagulant and frequently prescribed. It is usually available in 3 different strengths:
- 1mg tablets are brown
- 3mg tablets are blue
- 5mg tablets are pink.
Please ensure that you have all three different strengths of your anticoagulant as it is a variable dose medication. By having all of the
three strengths of the anticoagulant, you can then make up the correct
dose advised.
You order your anticoagulant on prescription at your GP surgery.
Please always have at least a week’s supply in hand. Speak to your
GP to arrange this.

Are there any side effects?
Like all medicines, anticoagulants have side effects. The most serious
effect of anticoagulants is bleeding. If you take your anticoagulant as
recommended by the Anticoagulant Clinic, it is unlikely that you will
have any problems. However, you should look out for signs of bruising
or bleeding and report them to the clinic or your family doctor as soon
as possible. These symptoms include:

- Nosebleeds lasting more than 15 minutes.
- Blood in your vomit or sputum.
- Passing blood when you go to the toilet – either in your urine or
  faeces.
- Passing black coloured faeces.
- Severe or spontaneous bruising.
- Headaches unrelieved by analgesia (painkillers).

Women experiencing unusually heavy periods especially with the
passage of clots should also report these symptoms.
Rare minor side effects may include loss of appetite, nausea, a rash or
hair loss.

When should I take the anticoagulant?
You should take the anticoagulant once a day, at roughly the same
time. We recommend that it be taken between 6pm and 8pm. This is
to ensure that we can contact you before you have taken your daily
dose, should there be any urgent dose changes.
At the clinic, we will manage your anticoagulant treatment and inform you what dose you should be taking. We will also tell you when to have a blood test and when it is time to stop taking anticoagulants, if appropriate.

**Missed a dose or taken the wrong dose?**
If you forget to take your anticoagulant, you can take it up to midnight that night. If it is after midnight, then miss that dose and continue to take the usual dose the following evening. If you miss a dose, make a note on your blood test form and then continue the next day with your normal dose. Do not take an extra dose to “catch up”.
If you took the wrong dose and this was much more or less than the advised dose, contact the anticoagulation clinic or your GP as soon as possible.

**What dose of anticoagulant should I take?**
The amount of anticoagulant needed varies from patient to patient. Your dose will depend on the results of a regular blood test that measures how long it takes your blood to clot.

The result is given as the **International Normalised Ratio** (INR). An individual not taking an anticoagulant would have an INR of 1.0. As a rough guide, if your blood takes twice as long to clot as normal, your INR will be 2. If it takes three times longer, your INR will be 3, and so on. The longer it takes your blood to clot, the higher the INR level.
Your doctor will set the target INR that is right for you.
After every blood test, you will be advised of the dose of anticoagulant required to maintain your INR within a set range. Occasionally, your dose may need alteration to maintain your INR within the desired range.
How often will I need to have an INR blood test?
You will need to have frequent INR tests when you begin taking anticoagulants. As your INR becomes more stable, blood tests will become less frequent, perhaps only once every few months. It is very important that you have regular INR tests to check the dose of anticoagulant you need. If you are unable to have a test on the date advised, it is fine to test earlier and up to one working day later without telling us. But if you need to delay your test longer than one day please let the clinic know so that another date can be agreed that is safe.

Where can I have my INR blood test?

- The Royal Berkshire Hospital Pathology Department, South Block at any time between 7.30am and 4pm on weekdays or the Concourse (subject to staffing) level 2 Centre Block from 9.30am to midday.
- West Berks Community Hospital, Thatcham, Pathology Department by appointment only by phoning 01635 273343.
- At your GP’s surgery – you will need to book an appointment with the practice nurse.
- Via your district nurse by appointment through the GP surgery.
- Bracknell Hub Pathology Department between 8am and 2pm on weekdays.

All these places will send your blood to the clinic for testing. It is essential that you always take an Anticoagulant Monitoring Service Request Form with you when you have your blood taken. This enables your results to be fast-tracked. This is the tear off slip that will be sent through to you by post with your results. Please ensure you complete the questionnaire on the form before each blood test.
How will I be told the results of my INR blood test?

The new dosage advice will be posted to you every time you have an INR blood test. This will include:

- Your INR result.
- The dose and colour of the anticoagulant you should take. The date of your next INR blood test.
- A tear off slip to take with you to your next test.
- Comments and further instructions/information should it be necessary. These will be in the comments box.

We try to send all dose letters out on the day of your test, using the Royal Mail postal service to deliver them to you. The aim is that they will arrive the following day. However, occasionally it can take longer for your letter to reach you. If your dose letter does not arrive the following day, continue taking your current dose until your letter arrives. If you have not received it after 3 working days, please call the clinic at that point so we can get another one out to you, to check your results and dosing instructions.

**If you require an urgent change to your anticoagulant dose we will contact you.** For this reason it is very important that the clinic has a reliable telephone number where we can contact you. If you do not have a telephone, please give us the telephone number of a relative or neighbour who will be certain to pass on any urgent message from us at the clinic. Please note that we will not leave messages on unidentified answer-phones.

So we will only telephone you if:

- We make an urgent change to your dose, and;
- We want you to have your next INR test within a week.

*Please note that if the clinic is exceptionally busy or your sample arrives to the hospital late, you may receive a telephone call the following day.*
How to contact the Anticoagulation Clinic
The telephone lines are open from 9.30am – 5.00pm. (Monday to Friday excluding Bank Holidays).

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<td>Fax: 0118 322 8374</td>
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Please note that our lines are very busy after 1.00pm as we are making outbound urgent calls to patients. We can be exceptionally busy at times and you may not be able to get through. We do try to answer all calls, however if you are unable to get through and your call is urgent, please contact your GP or NHS 111.

Can I take other medicines whilst I am on anticoagulants?
Many medicines interact with anticoagulants. You should always mention that are taking anticoagulants when talking to a doctor, nurse or pharmacist about other medication.

Prescribed medications:
If your GP prescribes any other medication such as antibiotics and strong painkillers, please have INR blood test with 5-7 days of starting the medication. New medications frequently upset the balance of your anticoagulation therefore an earlier INR test is advised. Please note the name of the medication and start date on your blood test form.

Self prescribed medications including herbal and homeopathic remedies:
Talk to your GP or the Anticoagulation Clinic before starting any herbal or homeopathic remedies/supplements. This is because they can affect your INR and the amount of anticoagulant you need to take. You should avoid vitamin supplements that contain Vitamin K.
Many pharmacists can advise you when buying over the counter medicines but it is important to tell them that you are on anticoagulants. If you have been prescribed any new medications, you should inform the clinic.

Medicines containing aspirin should only be taken if prescribed by your doctor. Ibuprofen and similar preparations should also be avoided. You can take paracetamol or codeine instead.

**Can what I eat or drink affect my anticoagulants?**

It is important to eat a well balanced diet. If you have major changes in your diet, this may affect how your body responds to the anticoagulation.

Vitamin K is a reversal agent for Warfarin. There are many foods that contain Vitamin K and these include green leafy vegetables, liver, egg yolks, avocado and cereals. It is recognised that these foods are an important part of a healthy diet. The main point to note is that the amount of these foods consumed should be consistent and moderate. Try to remember to avoid supplements that contain vitamin K.

It is therefore also important to let your GP, practice nurse or Anticoagulant Clinic know if you are planning to diet. Slow steady weight loss is safe. Please do not crash diet as this can dramatically affect your INR.

Both cranberry juice and grapefruit juice can affect your anticoagulant. Therefore, it is very important that if you would like to drink these then the amount (up to 150mls per day) remains consistent (and is drunk every day).

Current government guidelines state you are safest not to drink regularly more than 14 units of alcohol per week. This is to keep health risks from drinking alcohol to a low level. If you do drink as much as 14 units a week, it is essential to spread this evenly across the week, consuming no more than 2 units a day. Alcohol can increase the risk
of bleeding whilst on anticoagulation. Therefore “binge drinking” is very
dangerous and should not be undertaken.

What happens if I need an operation or dental treatment?
You should tell your doctor or dentist that you are taking anticoagulants well in advance.
In most case your dental treatment can go ahead as normal without stopping your anticoagulant. It is of benefit if you test your INR 48 hours pre-procedure.
If you are having planned surgery you may need to stop anticoagulants for a few days prior to an operation to reduce the risk of bleeding. The doctor will discuss this with you, and dependant on your diagnosis for anticoagulation an alternative may be prescribed. Please contact the Anticoagulant Clinic if you need advice.

What should I do if I am injured whilst on anticoagulants?
In the event of a minor injury, apply constant pressure to the site for 5-10 minutes using a clean dry dressing. If your arm or leg is affected, raise it up to help stop the bleeding. If you are unable to stop the bleeding or suffer a more major injury, you should seek medical help at once.

What should I do if I think I may be pregnant?
Anticoagulants taken during the early weeks of pregnancy may damage the unborn baby. Therefore you should not plan to become pregnant without consulting your doctor.
If you think you may be pregnant while taking anticoagulants contact your doctor at once for advice.
If breast feeding please seek advice from your GP to ensure that the anticoagulant you are taking is safe.
What should I do if I plan to go away on holiday?

Advise us in the clinic if you are going to be away in advance of your blood test. We can then attempt to arrange your next test so that it does not conflict with your holiday. If we feel that for your safety you should have a blood test during your holiday we will provide the necessary paperwork for this.

When you go away:

- Be sure to take enough tablets with you for the whole trip.
- You should keep a copy of your anticoagulation prescription with you and your most recent dosage letter.
- You should take your Anticoagulation Alert Card in case of emergencies. In an emergency, please seek medical attention from a doctor practising in the local area.
Anticoagulant summary checklist

You should:

✓ Report any signs of bruising or bleeding to the clinic.
✓ Have a blood test on the date advised and always ensure that your Anticoagulant Monitoring Request Form is sent with your blood sample.
✓ If you are unable to have a test on the date advised it is fine to test earlier and up to one day late without telling us. But if you need to delay your test longer than one day please let the clinic know so that another date can be agreed.
✓ Take your anticoagulant at the same time each day, preferably in the evening.
✓ Take the prescribed dose.
✓ Inform the clinic of any new medicines you are taking as some can react with your anticoagulant.
✓ Eat a normal balanced diet.
✓ Carry your Anticoagulant ID card with you.
✓ Remind your doctor/dentist/pharmacist/chiropodist that you are taking an anticoagulant.
✓ Make sure the clinic has an up to date contact telephone number for you.
✓ Continue the same dose of Warfarin if you do not hear from us by phone and read your dose letter carefully for any written dose changes.
You should not:

✗ Take aspirin, medicines containing aspirin or ibuprofen unless prescribed by your doctor.

✗ Drink more than moderate amounts of alcohol, cranberry or grapefruit juice.

✗ Miss a dose of anticoagulant unless advised to do so. Mark a calendar as you take your tablets to keep track of your doses.

✗ Take extra doses or change your dose of anticoagulant.

✗ Run out of anticoagulant tablets. Ask your GP if you need a repeat prescription.

Helpline: 0118 322 7691
(Mon-Fri 9.30am-1.00pm excluding Bank Holidays)
Fax: 0118 322 8374

More information is available on the Trust website
www.royalberkshire.nhs.uk

This document can be made available in other languages and formats upon request.