

## **Do You Take a Blood Thinner?**

Do you know your dose? Do you know if you take Warfarin (Coumadin) you need to get frequent monitoring of your levels at a clinic? Do you also know you need to be educated on green leafy vegetables and Vitamin K? Do you make sure you are noticing if you have bloody stools/urine or bloody noses? Or Headaches? Are you taking herbal remedies?

### **Common Blood Thinners, Treatments, Side Effects, and Information**

#### **Warfarin (Coumadin)**

Prescribed primarily for treatment of:

- VTE
  - venous thromboembolism
    - a blood clot that forms in deep veins in the legs – known as a DVT
  - or
    - a blood clot that travels to the lungs, called a PE or pulmonary embolism
- Afib (atrial fibrillation)
- Post MI (heart attack)
- Mechanical (titanium, carbon), bioprosthetic tissue (pig valve - porcine, cow valve/ring - bovine) atrial or mitral valve or both

Your dose will change often based on your “INR” blood level that will be drawn daily, every other day and when the level is stable your blood will be drawn weekly during your entire therapy. Your INR level needs to be between 2.0-3.0 or as directed by your physician. It becomes difficult to maintain that when you do not fully understand that **(1) you need to be monitored weekly and attending a clinic for frequent lab draws for the INR levels and (2) you need to pay attention to how many salads and green vegetables you eat daily from each category of Vitamin K level (low level, medium level and high level of Vit K).** Therefore, you will need to be provided this information when you start your prescription of Warfarin (coumadin) so you will have a good understanding. The ideal is to remain stable during your therapy with Warfarin (coumadin). Another complication is a severe skin rash. If you notice any skin changes you need to seek medical conditions as soon as possible (Alquwaizani, et al., 2013). The antidote for high INR is INR level dependent and provided by the physician. It ranges from Vitamin K+ to Fresh Frozen Plasma to Prothrombin complex concentrates and if your INR is too low the physician provides the antidote.

#### **Dabigatran etexilate (Pradaxa)**

Prescribed primarily for treatment of:

- Stroke
- To prevent embolism (blood clots forming/traveling) in non-valve related Afib patients

This drug is eliminated through the kidneys up to 80% unchanged in the urine and is longer in patients with severe kidney dysfunction. It is therefore not a desirable choice for someone with kidney dysfunction. The antidote for Pradaxa is Idarucizumab (Moncivais, 2019).

### **Common Side Effects**

- Dizziness
  - Upset stomach
  - Headache
  - Shortness of breath
- (Alquwaizani, et al., 2013).

### **Rivaroxaban (Xarelto)**

Prescribed primarily for treatment of:

- Prevention of strokes in patients with non-valve related Afib
- Treatment of post DVT (deep vein thrombosis - blood clot in one or both legs or arms)
- Treatment of post Pulmonary Embolism (blood clot that traveled to the lung)
- To prevent DVT after hip or knee replacement surgery

This medication helps block the formation of blood clots. It may also be used with children to prevent blood clots after heart surgery (Fontan procedure) (Durbin, 2024). You should not drink alcohol when on this medication (Durbin, 2024). The antidote for Xarelto is Andexanet alfa also known as Andexxa (Moncivais, 2019).

### **Common Side Effects**

- Dizziness
- Weakness
- Lightheadedness/fainting
- Headaches
- Pins/needles tingling/numbness

### **Apixaban (Eliquis)**

Prescribed primarily for treatment of:

- Stroke
- To prevent embolism in non-valve related Afib in high-risk patients
  - High-risk patients have two of the following: >80 years old; body weight <132 lbs; blood creatinine <1.5 mg/dl

Eliquis is a small pill. Be sure to tell your doctor if you have any planned surgical procedures even minor) as your medicine may need to be stopped for a few days prior to the procedure and an

alternative taken (Lovenox) for those few days to decrease your bleeding risk (Durbin, 2024, Xarelto). Eliquis is often given as protection against DVT after surgery for a few days until you become mobile (Durbin, 2024, Xarelto). It is important to begin getting up and moving as soon as possible after any surgery. The antidote for Eliquis is Andexanet alfa also known as Andexxa (Moncivais, 2019).

### **Common Side Effects**

- Bruising easily
  - Headaches
  - Weakness
  - Dizziness
- (Durbin, 2024, Eliquis)

### **Mixing Anticoagulants with Herbs**

Herbal remedies and teas seem harmless and are meant for our health and benefit in so many ways it is difficult for us to see them as something that may cause us harm when taken with our current medications. Please be aware that you can cause increased bleeding and put yourself at risk for a Stroke at the very least by taking herbal remedies and teas while taking anticoagulant medications. I hope you will find the following information useful.

The following herbs, especially daily and in large doses, can cause **Major risks** when taken with anticoagulant medications and lower the effectiveness of your anticoagulant:

Cat's Claw, Celery, Cinnamon, Chamomile, Danshen, Dong quai, Evening primrose, Fenugreek, Garlic, Ginger, Ginkgo, Horse chestnut, Koji Iron, Licorice, Red clover, Reishi, Turmeric, Willow (Tsai, 2013). Live Prebiotics/Probiotics (it states on the label - may increase bleeding risk).

The following herbs, especially daily and in large doses, can cause **Moderate risks** when taken with anticoagulation therapy medications and lower the effectiveness of your anticoagulant:

Andrographis, Bogbean, Cayenne, Clove, Flaxseed, Kudzu, Onion, Saw palmetto, Aloe vera, Asafetida, Bitter orange, Blackcurrant seed, Burdock, Cassia, Cinchona, Coltsfoot, Da huang, Eucalyptus, Lycium, Milk thistle, Nutmeg, Peony, Royal jelly, Safflower, Soybean, Valerian, Yarrow (Tsai, 2013).

If you are going to take any herbal remedies at all please pass it/them by your Cardiologist, Cardiothoracic Surgeon, specialist(s), and your Primary Care physician before taking any. I would also recommend that you read every label and look up every ingredient before taking any herbal remedies if you are on a blood thinner. Even Prebiotics and Probiotics can increase bleeding when combined with anticoagulant medications. You can also ask the pharmacist.

### **Be Aware of the Following**

Make sure you know and understand your doses of anticoagulants and try your best not to skip doses, miss a dose and DO NOT double up on your doses if you miss a dose.

If you are taking any anticoagulant, be watchful for any signs of bleeding like bloody nose or dark stools, blood in your urine, vaginal bleeding that is abnormal, or any other abnormal findings. You should follow closely with your MD and MD specialist and do not discontinue this medication without the advice and direction of your doctor(s). Suddenly stopping any of these medications can increase your risk of stroke or forming blood clots.

Anticoagulants cannot be taken with NSAIDs – Aspirin, Ketoralac (Toradol), Ibuprofen (Advil, Motrin) and Naproxen (Aleve, Anaprox). Anticoagulants can be taken with Tylenol.

The dose of an anticoagulant is given by your provider for your condition and should be followed unless you have a complication. If you feel you are having a complication do not change or stop your medication for any reason but call your provider right away and make sure you reach someone. If you are unable to reach a person by phone, go to your nearest quick care right away.

You will find that you bruise more easily while taking anticoagulants. Take care not to fall and when you fall take care not to hit your head; try to pay attention whether you hit your head and if you have any symptoms like headache, blurred vision, confusion, inability to walk well, vomiting. If you are having any of these symptoms, please seek treatment right away. If you do hit your head, go to the emergency room so you can be examined properly – a quick care will not have a CT scan which you may need after a fall and hitting your head.

If you are having any invasive procedure or minor procedure such as a colonoscopy, be sure to tell the provider or office so that you have the time to be properly prepared beforehand. Anticoagulants increase your risk of bleeding and, therefore, may need to be stopped prior to procedures and other methods of anticoagulation will be used for a few days to decrease your risks of bleeding.

I hope this will help you in your journey with anticoagulant therapy.

Sharon DeLellis, MSN, RN

## References:

Alquwaizani M, Buckley L, Adams C, Fanikos J. Anticoagulants: A Review of the Pharmacology, Dosing, and Complications. *Curr Emerg Hosp Med Rep*. 2013 Apr 21;1(2):83-97. doi: 10.1007/s40138-013-0014-6. PMID: 23687625; PMCID: PMC3654192

Durbin, K. MD medically reviewed (last updated July 25, 2024). Eliquis Uses, Dosage, Side Effects & Warnings. *Drugs.com*. [Eliquis: Uses, Dosage & Side Effects Information - Drugs.com](#)

Durbin, K. MD medically reviewed (last updated July 25, 2024). Xarelto Uses, Dosage, Side Effects & Warnings. *Drugs.com*. [Xarelto: Uses, Dosage & Side Effects Information - Drugs.com](#)

Moncivais, K. PhD (May 2, 2019). Anticoagulant Antidotes: A Safety Requirement. *ConsumerSafety*. [Anticoagulant Antidotes Are Necessary for Patient Safety](#)

Tsai HH, Lin HW, Lu YH, Chen YL, Mahady GB. A review of potential harmful interactions between anticoagulant/antiplatelet agents and Chinese herbal medicines. *PLoS One*. 2013 May 9;8(5):e64255. doi: 10.1371/journal.pone.0064255. PMID: 23671711; PMCID: PMC3650066.