

# Healthy Seniors

A HEALTH CARE NEWSLETTER FOR NEW YORK SENIORS PATIENT SAFETY ISSUE

## Blood Thinners

### Staying Safe and Healthy While Using Warfarin

**Q: What are “blood thinners”?**

**A:** Some prescription medications are commonly called “blood thinners.” They may also be called “anticoagulants” (ant-eye-ko-ag-u-lants). “Anti” means against, and “coagulant” means blood clotting. These medications slow down how fast blood clots and protect the body from problems caused by unwanted clots. The blood is not really “thinner,” it just takes a little longer to clot than usual. Warfarin is a prescription blood thinner. Warfarin is the generic name; it is also known by the brand names Coumadin® and Jantoven®. This issue of *Healthy Seniors* discusses blood clots and how to safely take warfarin.

**Q: What causes unwanted blood clots?**

**A:** Normal clotting is needed for the body to heal from cuts and other injuries. Too much clotting can block the flow of blood and cause serious damage to different parts of the body. (See table below.)

Some people are born with conditions or diseases that cause blood to clot too quickly. Other people develop clots when they have problems with irregular heartbeats, have been seriously injured, undergo major surgery, or when heart valves are damaged or have been replaced. These incidents could lead to serious medical problems, so it is important for you and your doctors to be aware of your potential to clot.

Walking and other exercise helps to keep blood moving and prevent unwanted clots. Sometimes, people who cannot get up and move around develop clots in their legs, arms and lungs. Doctors often give blood thinners to patients in hospitals to prevent clots until the patients are well enough to get up and move around again.

**Unwanted clots can cause serious medical problems**

**Where the**

<b>Clot Occurs</b>	<b>Possible Medical Condition</b>
Heart	Heart Attack (Myocardial Infarction, MI)
Brain	Stroke (Cerebrovascular Accident, CVA)
Lung	Pulmonary Embolism (PE)
Legs, Arms	Deep Vein Thrombosis (DVT)

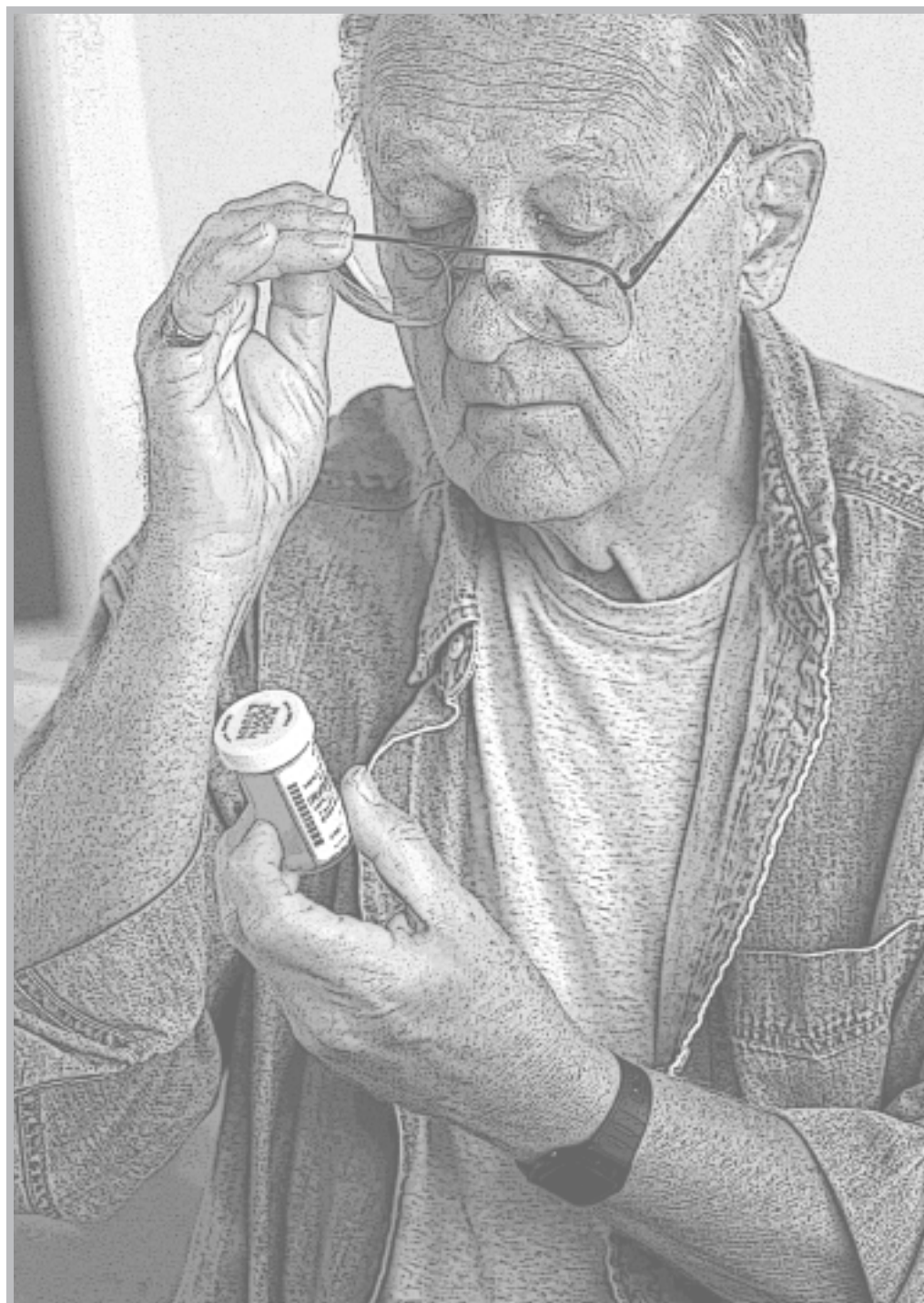
**Q: Are there different types of “blood thinner” medications? How do they affect clotting?**

**A:** There are several different types of medications that affect clotting:

**Aspirin** is a commonly-used pain reliever that also helps prevent unwanted clots. Doctors recommend that some people take aspirin everyday to prevent clots due to heart disease or problems with blood vessels. You should speak with your doctor before starting daily aspirin therapy. Tell all of your doctors, dentists and caregivers if you use aspirin and how often you are taking it.

**Heparin** is another type of blood thinner; it is always given by injection (shot). Heparin is usually given to patients who are in the hospital or who have home nursing care. Some patients are even taught (by a licensed medical professional) how to inject themselves.

*continues on page 2*



Because most people want to avoid shots, heparin is generally used for short periods of time. The most common brand names of heparin products are Lovenox® and Fragmin®.

Heparin is sometimes used to thin blood when patients are first starting to use warfarin. **Warfarin (Coumadin®, Jantoven®)** is a powerful blood thinner that can be taken in pill form. Because it is easier to take pills than to get shots, warfarin is the most commonly used prescription blood thinner. The rest of this article discusses how to safely take warfarin.

**Q: When should warfarin (Coumadin®, Jantoven®) be taken?**

**A:** Warfarin should be taken at the same time every day. You should never adjust your dose of warfarin or skip doses without being instructed to do so by your health care provider.

**Q: What should I do if I miss a dose of warfarin (Coumadin®, Jantoven®)?**

**A:** It is very important to take your warfarin exactly as prescribed. Missing one or more doses can affect your health, so it is important to know how your doctor wants you to handle the occasional missed dose(s). The table below offers some ideas on what to do when you miss a dose(s). Ask your doctor if s/he has specific instructions for handling missed dose(s) of warfarin.

Examples of what to do when you miss a dose(s) of warfarin*	
Scenario	Response
You forget to take one dose, and realize it later the same day.	<ul style="list-style-type: none"> <li>• Take your warfarin as soon as you remember.</li> <li>• Call your doctor, if you have been instructed to do so.</li> </ul>
You forget to take one dose, and don't realize it until the next day.	<ul style="list-style-type: none"> <li>• Skip the missed dose, and take your next scheduled dose as directed.</li> <li>• Never take a double dose to make up for a missed dose.</li> <li>• Call your doctor, if you have been instructed to do so.</li> </ul>
You miss two or more warfarin doses.	<ul style="list-style-type: none"> <li>• Call your doctor for instructions.</li> </ul>
You miss a dose(s) for a specific reason: <ul style="list-style-type: none"> <li>• Illness, (e.g., vomiting);</li> <li>• Money, (e.g., too expensive); or</li> <li>• Can't get to pharmacy, (e.g., no transportation).</li> </ul>	<ul style="list-style-type: none"> <li>• Talk to your doctor and pharmacist about why you are missing doses so they can help you.</li> </ul>

\*For general information only. Ask your doctor for specific instructions.

**Q: How does my doctor know what dose is right for me?**

**A:** Warfarin doses vary from patient to patient, and can vary from day to day. This is because everyone's body reacts to the medication a little differently. There are also many foods and drugs that can change how quickly your blood clots while taking warfarin. To make sure you are on the right dose of warfarin, your doctor will do frequent blood tests called prothrombin time (PT) and international normalized ratio (INR).



**Q: What are Prothrombin Time (PT) and International Normalized Ratio (INR) tests?**

**A:** PT and INR are blood tests that measure how fast your blood clots. (PT is the time, in seconds, it takes your blood to clot; INR is the numeric value that your doctor will report to you.) These tests are used to monitor how well your warfarin is working and help your doctor decide if s/he needs to change your warfarin dose. The desired INR range is usually between 2.0 and 3.0, but it will depend on what condition the warfarin is being used to treat. Your doctor will decide what INR value is ideal for you.

**Q: When should I get my INR tested?**

**A:** It is important to have your blood tested as often as your doctor instructs. This helps your doctor to monitor your INR value and make sure your warfarin dosage is the right amount for you. You do not have to prepare or do anything special before getting an INR test. Schedule your INR tests:

- ✓ At least once a month when your INR is in the target range, (e.g., 2.0 to 3.0).
- ✓ More frequently when:
  - Your INR is too high or too low;
  - You have problems with bleeding;
  - You are just getting started on warfarin;
  - You start, stop, or change any of your medications, including:
    - Prescriptions or samples from any doctors
    - Over-the-counter (non-prescription) products
    - Herbs and dietary supplements;
  - You have a major change in your diet; and
  - You experience any change in your health or medical conditions.

**Q: Is it all right to take other medications with my warfarin (Coumadin®, Jantoven®)?**

**A:** Many medications can affect how well warfarin works. Some medications will increase the effects of warfarin, making the risk of bleeding higher. Other medications can decrease the effects of warfarin, increasing the risk of blood clots.

You should let the doctor that manages your warfarin know whenever you start, stop or change any prescription drugs or over-the-counter products. You should also let all of your other doctors know that you are taking warfarin

**Common prescription drugs known to affect warfarin include:**

- Antibiotics (commonly used to fight bacterial infections);
- Anti-fungals (commonly use to fight fungus infections); and
- Some heart medications.

**Q: What about the medication samples that my doctor gives me?**

**A:** Some doctors give samples to patients to help their patients save money or get them started on a new medication. As your pharmacist, other doctors, and insurance company do not automatically know when you get samples, it is important to tell **all** of your doctors and pharmacists when you are given any medication samples.

**Q: Can over-the-counter (non-prescription) medications affect warfarin?**

**A:** Even medications that you buy without a prescription can affect your warfarin. Some products that are known to affect warfarin include:

- Pain relievers, (e.g., aspirin, ibuprofen, naproxen, Advil®, Aleve®, Motrin®, and Naprosyn®);
- Herbal products, (e.g., ginseng, ginkgo, glucosamine, and St. John's Wort);
- Certain stomach acid-reducing products, (e.g., cimetidine, Tagamet®); and
- Multivitamins.

These medications change the way your warfarin works, and the doctor that manages your warfarin and pharmacist may not know that you are taking them. Speak to your doctor and pharmacist before starting **or** stopping any over-the-counter products.

**The bottom line:** It is impossible for you to know how a medication will affect you and your INR value. It is important to call your doctor when you start or stop any medication, so you can have your INR value checked. Your doctor can then decide if s/he needs to make any changes to your warfarin dose.

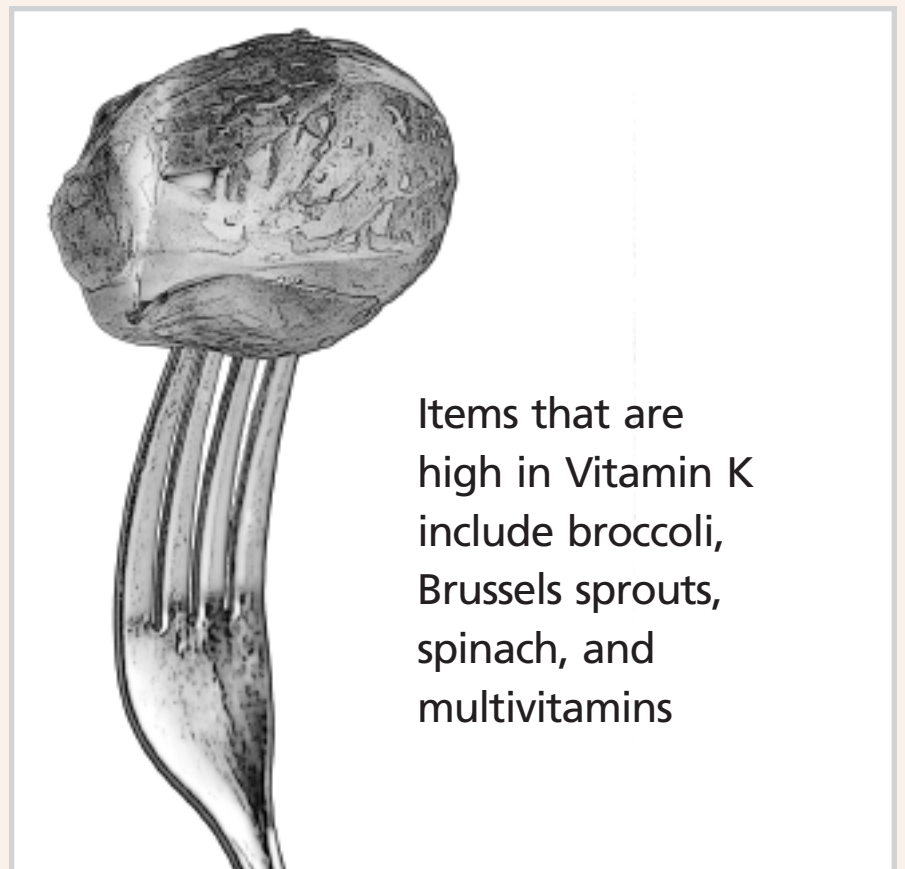
**Q: Do I need to avoid any certain foods/vitamins while taking warfarin (Coumadin®, Jantoven®)?**

**A:** It is important to understand the effect of Vitamin K on warfarin. The Vitamin K that you get from food and multivitamins helps your blood clot, but warfarin does just the opposite. Warfarin works against vitamin K to keep the blood from clotting. Too much Vitamin K can make warfarin less effective. It is important to discuss your diet and the vitamins you take with the doctor that manages your warfarin.

You can still eat healthy foods that contain Vitamin K. To help keep your INR value stable, you should try to eat about the same amount of these types of foods each day. You should also let your doctors know if you have any major changes to your diet for any reason.

Items that are high in Vitamin K include:

- Broccoli
- Brussels sprouts
- Spinach
- Multivitamins



**Q: What side effects might I experience when taking warfarin (Coumadin®, Jantoven®)?**

**A:** Since warfarin decreases how fast the body can form clots, people who are taking warfarin bleed longer than people who are not taking warfarin, especially after an injury. Keeping your INR value in the proper range will decrease your risk of bleeding.

Note: Even when your INR value is controlled it is still possible to experience some bleeding. You may notice minor bleeding, such as:

- Bleeding gums when you brush your teeth;
- Bruises forming more easily; and
- Bleeding from small cuts.

These types of minor bleeding are usually nothing to be concerned about, unless the bleeding becomes bothersome. If your gums or a small cut won't stop bleeding, or if you have large bruises that form for no reason, you should call the doctor that manages your warfarin.

**⚠️ Serious bleeding can be dangerous, so you should get immediate medical attention from your doctor, the emergency room, or 911 if you notice any of the following:**

**⚠️ Signs of Serious Bleeding**

- Vomit that contains blood or looks like coffee grounds.
- When you actually see (red) blood in your stool or if your stool is dark and tar-like. (The dark color may mean that there is blood in your stool.)
- Urine that is red (could be "blood red" or any other shade of red—even as light as faint pink) or urine that is unusually dark.
- Coughing up phlegm (mucus) that shows blood.



A diary or calendar is a great way to keep track of your warfarin usage.

### **Other Symptoms to Report Immediately**

- Severe abdominal pain;
- Headaches that are severe or won't go away;
- Confusion or decreased alertness; and
- A fall or a hit on the head.

It is very important that you tell **all** of your health care providers about all of the medications you are taking. Further, make sure to tell all of your doctors, nurses, dentists, and pharmacists that you take warfarin, even if they didn't prescribe it or fill the prescription for it.

You may also want to tell your family and close friends that you are taking warfarin so they can tell your health care providers at times when you cannot. You can also buy and wear a medical alert bracelet or necklace that states you are taking warfarin.

### **Q: Should I keep a warfarin (Coumadin®, Jantoven®) diary or calendar?**

**A:** A diary or calendar is a great way to keep track of your warfarin usage, especially if your doses are constantly changing. This will help prevent missed doses or taking double doses. Keeping track can be very simple. Just write down the strength of medicine and the date you took it. You should also write down any INR tests that are scheduled and the results. This will help you and your health care providers better manage your warfarin.

### **Q: Can I go to the dentist or have surgery while taking warfarin (Coumadin®, Jantoven®)?**

**A:** Patients who are taking warfarin can still go to the dentist and have surgical procedures performed; but it is important to tell all of your doctors and your dentists that you take warfarin well in advance of any procedures. Depending on the situation, your doctor may choose to change how you take your warfarin before **and** after the procedure.

## **KEY POINTS FOR SAFE WARFARIN USE**

- ✓ Always take warfarin exactly as prescribed.
- ✓ Be sure to have your blood tested (INR test) as often as directed. (See page two for more information on this test.)
- ✓ At every visit, remind your health care provider(s) that you take warfarin.
- ✓ Tell the doctor that manages your warfarin about all medications and over-the-counter products that you use.
- ✓ Tell the doctor that manages your warfarin about any changes in the dosage of your medicine(s).
- ✓ Always maintain your diet by making healthy food choices. Tell your doctor about any major changes you make in your diet.
- ✓ Consider buying and wearing a medical alert bracelet or necklace that states you take warfarin.
- ✓ Report any increases in bleeding to your doctor.
- ✓ Seek immediate medical attention for serious bleeding, bruising or any major changes in how you feel.

**Q: Are there tools I can use to help me safely take my warfarin?**

**A:** The bottom half of this page contains a safety guide that you can cut out and post on your refrigerator. It is meant to remind you, your family and caregivers how to safely take warfarin. This guide:

- Prompts you to talk to your doctor when any of your medications change;
- Reminds you of when to contact your doctor or seek immediate medical attention;
- Provides a space for you to write down your doctor's name and phone number; and
- Offers suggestions for how to best communicate with your doctor and his/her staff.

**Q: Are there other materials available to my doctor and other health care professionals?**

**A:** Yes. IPRO has assembled a variety of resources for doctors and other professionals who want to improve the quality of warfarin therapy. These materials can be accessed via the internet at [www.jeny.ipro.org](http://www.jeny.ipro.org) or at [www.ipro.org](http://www.ipro.org).

**Q: Who published these materials and why?**

**A:** This issue of *Healthy Seniors* was prepared with support from the Centers for Medicare & Medicaid Services (CMS). CMS is the agency of the US Department of Health and Human Services that oversees Medicare and the Medicare Part D drug benefit.

*Healthy Seniors* is prepared and distributed by IPRO, a not-for-profit company under contract with CMS to improve the quality of health care received by Medicare beneficiaries across New York State. More information about IPRO can be found on the last page of this newsletter or you can visit [www.ipro.org](http://www.ipro.org).

This issue of *Healthy Seniors* was released as part of the SWAT Project. SWAT stands for Safe Warfarin-Antibiotic Testing. The project goal is to make sure that patients who take warfarin get their INR tested within three to seven days of being prescribed antibiotics that might interact with the warfarin. The project also seeks to improve the overall quality of warfarin management provided to all of New York State's Medicare beneficiaries who are prescribed warfarin.

# Taking Charge of My Warfarin

 **I will talk to the doctor that manages my warfarin if I:**

- **START** any new prescription drug(s) or over-the-counter product(s);
- **STOP** any prescription drug(s) or over-the-counter product(s); and
- **CHANGE** the dose of any prescription drug(s) or over-the-counter product(s) that I already take.

**Experience bothersome bleeding**, such as:

- Gums that won't stop bleeding; and
- Severe bruises or bruises that appear for no reason.

 **When I call my doctor's office I will say:**

- 1. My name is** (State your name.)
- 2. The doctor that prescribed my warfarin is** (State your doctor's name.)
- 3. I was told to call when any of my medications change or if I have noticed bleeding.**
- 4. I am calling to tell you** (Describe bleeding or change to medications.)
- 5. Does the doctor have any new instructions for me?** (Write down and follow any new instructions.)

**I will seek immediate medical attention from my doctor, the emergency room, or 911 if I notice:**

 **Serious Bleeding** I can see, including:

- Vomit that shows blood or looks like coffee grounds;
- Stool or bowel movements that show blood or are very dark and tar-like;
- Urine that is pink, red or unusually dark; and
- Phlegm or sputum that shows blood.

 **Major Changes** in how I feel, including:

- Severe abdominal pain;
- Headaches that are severe or won't go away;
- Confusion or decreased alertness;
- Dizziness or lightheadedness; and
- A serious fall or hit my head.

**The doctor that manages my warfarin is:**

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**My doctor's phone number is:**

(     )     —

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# Important Telephone Numbers

## Quality of Care Concerns

“Quality of Care” concerns may include, but are not limited to, the following examples: thinking you may have received the wrong medication; believing you received incorrect treatment for a new or old condition; or thinking your health provider or physician did not give you the proper care instructions.

Report quality of care concerns to the IPRO Beneficiary Complaint Response Program by calling **1-800-331-7767, ext. 464**.

## Hospital Services

If you think you are being discharged from the hospital too soon, call **1-800-446-2447**.

## Non-Hospital Services

### Traditional Medicare

If you receive a **Notice of Medicare Provider Non-Coverage**, call **1-800-833-0356 (TTY 866-446-3507)** to ask for an **Expedited Determination** of your case.

### Medicare Advantage

If you receive a **Notice of Medicare Non-Coverage**, call **1-888-696-9561 (TTY 866-446-3507)** to ask for a **Fast Track** appeal.

Telephone lines are open seven days a week from 8:30AM to 4:30PM—even on Saturdays, Sundays and holidays.

## Other Questions

For answers to general benefit questions or other Medicare inquiries, call **1-800-MEDICARE (1-800-633-4227) (TTY/TDD 1-877-486-2048)**; or, visit Medicare’s Web site **www.medicare.gov**

## Healthy Seniors

### PATIENT SAFETY ISSUE

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## What is IPRO?

IPRO is an independent, not-for-profit corporation dedicated to assessing and improving the quality of health care received by consumers through the use of innovative methods and technologies. An expert in the field of health care evaluation, IPRO is under contract with the federal government and state governments to assess the quality of health care provided to Medicare beneficiaries and Medicaid recipients. Based in Lake Success, New York, IPRO serves government, commercial insurance, unions, and managed care organizations. To learn more about IPRO, visit our Web site at **www.ipro.org**.

## Calling IPRO to Appeal?

Please have this information available when you call:

- Beneficiary’s name
- Your name and relationship to the beneficiary (if you are not the beneficiary)
- Beneficiary’s Medicare number and date of birth
- Beneficiary’s address
- Effective date on the Notice
- Telephone number, including area code, where IPRO can contact you
- Name of the provider or facility
- Telephone number, including area code, of the provider or facility

