Drug Therapy - Warfarin

What is warfarin?

Warfarin is an anticoagulant, a drug used to thin the blood. This prevents blood clots from forming so easily, reducing the likelihood of stroke, deep vein thrombosis and pulmonary embolism in those who may be at greater risk, such as those with the heart rhythm atrial fibrillation and patients with metal heart valves.

While taking warfarin you must have regular blood tests to establish your INR (international normalised ratio). This is a measure of how long it takes your blood to clot. The results of the INR tests will determine the dose of warfarin you need to take - this may vary from time to time (see below).

Interactions

The anticoagulant effect of warfarin can be altered by alcohol, certain foods and drinks, and of course other medications. The lists below are a guide to some of the substances that interact with warfarin - please note, however, that these lists are not exhaustive, and you should discuss any queries or concerns you have with your doctor.

- Alcohol

Consuming large amounts of alcohol while taking warfarin significantly increases the risk of bleeding. Patients are strongly advised to drink no more than the recommended three units of alcohol per day for men, and two for women. It is not safe to “save up” units for a weekend or special occasion.

One unit of alcohol is roughly equivalent to half of one small glass of wine (125 ml), a single measure of a spirit such as vodka, or a half-pint of beer or lager.

- Food and drink

Asparagus  Cauliflower  Grapefruit juice
Avocado  Cereals  Kale
Bran  Cheese  Liver
Broccoli  Cranberry juice  Parsley
Brussels sprouts  Garlic  Soy products
Cabbage  Ginger  Spinach

You do not necessarily need to avoid these foods, just ensure their intake is stable. Do not make any dietary changes without first discussing them with your doctor.

- Medication

It is extremely important that any doctors involved in your care are informed that you are taking warfarin. You should carry the yellow anticoagulant booklet with you at all times to alert medical staff in case of emergency, and inform your dentist prior to treatment.
There are many medications that may either increase or decrease the effects of warfarin, the majority of which are listed below:

- Anabolic steroids e.g. Oxymetholone, Stanozolol
- Analgesics e.g. Aspirin, Ibuprofen, Paracetamol
- Antiarrhythmics e.g. Amiodarone, Propafenone
- Antibiotics e.g. Ciprofloxacin, Erythromycin, Rifampicin, Penicillins
- Anticonvulsants e.g. Carbamazepine
- Antidepressants e.g. Citalopram, Fluoxetine (Prozac), Venlafaxine
- Antiepileptics e.g. Carbamazepine, Phenobarbital, Primidone, Valproate
- Antifungals e.g. Fluconazole, Griseofulvin
- Antimalarials e.g. Proguanil
- Antiplatelets e.g. Aspirin, Clopidogrel, Dipyridamole
- Antivirals e.g. Ritonavir, Atazanavir, Nevirapine
- Chemistry regimes
- Corticosteroids e.g. Hydrocortisone, Prednisolone, Fludrocortisone
- Hormone Antagonists e.g. Danazol, Flutamide, Tamoxifen
- Immunosuppressants e.g. Azathioprine
- Lipid regulators e.g. Simvastatin, Rosuvastatin, Ezetimibe, Cholestyramine
- Oestrogens and Progestogens (oral contraceptives)
- Testosterone e.g. Acenocoumarol
- Thyroid hormones e.g. Thyroxine
- Ulcer-healing drugs e.g. Cimetidine, Omeprazole, Pantoprazole
- Uricocurics e.g. Allopurinol, Sulfinpyrazone
- Vaccines e.g. Influenza vaccine

- Vitamins and other supplements
  - Gingko
  - Ginseng
  - Omega 3, 6, 9, fatty acids
  - St. John’s Wort
  - Vitamin K

**Cautions**

The most serious side effect of warfarin is bleeding. You should contact your anticoagulation clinic or seek urgent medical attention immediately if you experience:

- Severe bruising
- Prolonged nosebleeds
- Blood in the urine or faeces
- Coughing up or vomiting blood
- Any other abnormal bleeding

**Further information**

For further information or advice, contact your GP or anticoagulation clinic.