

Warfarin (Coumadin[®] / Jantoven[®])

1. What is warfarin (Coumadin[®] / Jantoven[®])?

Warfarin is an **anticoagulant**. Sometimes warfarin is referred to as a “blood thinner,” however; warfarin does not affect the thickness of your blood. Anticoagulants help reduce the number of clots forming in blood. Clots can form in your legs and lungs and lead to strokes, heart attacks, and other dangerous medical conditions. Warfarin does not break up existing clots – it only helps to prevent new clots from forming.

2. What is the difference between warfarin and Coumadin[®] / Jantoven[®]?

Coumadin[®]/Jantoven[®] are the brand names for warfarin. They are the same drug, so they will work the same way, but there may be small changes between their formulations which may cause your body to react differently. Many brands of warfarin are available and it is very important that you know what company makes your warfarin so that your blood tests are not affected. One way to avoid confusion is to always get your prescription refilled at the same store and verify the manufacturer when picking up your medication.

3. Why do I need to take warfarin (Coumadin[®]/Jantoven[®]) and how do I know it is working?

There are many reasons people need to take warfarin. Some reasons may include:

- a. Previous heart attack
- b. Atrial fibrillation
- c. Previous clots in your leg or lung
- d. Heart valve replacement

You will know that your warfarin is working by your blood tests. These blood tests measure your INR (international normalized ratio), which tells you how long it takes for your blood to clot. Most of the time your INR goal is between 2-3 or 2.5 – 3.5, however, your healthcare provider will determine your exact goal. If your level is too low you may be at a higher risk for clots forming and if it is too high you may be at a higher risk for bleeding.

4. How often do I need to get bloodwork?

When you start warfarin your INR will be monitored at least once a week. Once your INR is at goal, your visits may be extended so that you don't need to come in as often. Your healthcare provider will determine when you need to come in for blood work. For your safety, it is very important that you do not miss these appointments.

5. What affects my bloodwork (INR)?

Several factors may affect your INR level. Illnesses, diet, medications (prescription and over-the-counter), and certain disease states may affect your INR. Notify your healthcare provider about any changes in your lifestyle, health, or medications at each visit. If your INR is not within goal, your dosage of warfarin may need to be changed for your safety.

6. How do I take warfarin (Coumadin[®]/Jantoven[®])?

Try to take your warfarin at the same time each day, preferably later in the evening. Take it exactly as prescribed. If you forget a pill and it is close to your next dose, skip the missed dose. **Do NOT double up** on your medicine to make up for a missed dose. When having your INR checked, be sure to inform your healthcare provider if you have forgotten or missed a dose as this may affect your blood levels.



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7. What are the risks of taking warfarin (Coumadin[®]/Jantoven[®])?

The most common side effect and a serious risk of warfarin is **bleeding**. While you are taking warfarin, it may take longer than usual for your blood to clot. This is normal; however, contact your healthcare provider if you experience any signs or symptoms of major bleeding. These may include:

- Excessive bleeding of the gums or nose
- Pink or brown colored urine
- Red or tarry black stool
- Heavier than usual menstrual flow
- Excessive bruising or bruises that get larger
- Cuts that won't stop bleeding after applying 20 minutes of continuous pressure
- Vomiting blood or something that looks like coffee grounds

8. Should I only eat certain foods while I am on warfarin (Coumadin[®]/Jantoven[®])?

While diet does affect warfarin, the main thing to remember is to **keep your diet consistent!** Warfarin is balanced against the vitamin K in your diet (typically found in green, leafy vegetables). This means that **vitamin K should NOT be avoided**, but rather, the intake kept consistent. Varying the amount of foods high in Vitamin K may cause a fluctuation in clotting time. Consistency is key to maintaining therapeutic blood levels of warfarin. Avoid drastic changes to your diet. Notify your healthcare provider when starting or stopping any nutritional supplements, protein supplements, vitamin fortified beverages or if your diet changes because of illness. Alcohol will also affect your blood levels of warfarin. Keep your intake of alcoholic beverages consistent (ie: avoid binge drinking). Inform your healthcare provider if your intake has changed at all since your last blood test.

9. What drugs interact with warfarin (Coumadin[®]/Jantoven[®])?

There are many drug interactions with warfarin. It is very important that you inform your healthcare provider when starting or stopping any medications. This includes vitamins, minerals, herbals, and dietary supplements! Unless directed otherwise by your healthcare professional, avoid medications for headaches, pain, and fever relief as they can increase your risk of bleeding. Some examples may include: Advil[®] (ibuprofen), Aleve[®] (naproxen), Bayer[®] (aspirin). When pain relief is needed, **occasional** use of Tylenol[®] (acetaminophen) is acceptable. Also, be sure to inform your healthcare provider when you are switching brands or companies of vitamins or over the counter medications, as different brands can affect warfarin differently.

10. How do I identify that I am taking warfarin (Coumadin[®]/Jantoven[®])?

You should always carry an Emergency Medical Identification Card with a list of your current medications and their dosages. Identification jewelry (necklace or bracelet) that states you are taking warfarin is also available at your local pharmacy. These provide important information to healthcare professionals in the event you are unconscious.

