# What AFib Patients Should Know About Blood Thinners

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## Atrial Fibrillation and Blood Thinners: What Patients Need to Know

Cardiovascular health data collected in 2010 show that an estimated 33.5 million people worldwide have atrial fibrillation (AFib). If you suffer from AFib, you are also at a higher risk of experiencing a stroke.

A stroke occurs when a blood clot originating in the heart travels to the brain and becomes lodged in an artery, disrupting blood flow. Many people that have AFib can reduce their risk of stroke by as much as 60 percent if they take an anticoagulant (blood thinner) medication.

### The Role of Blood Thinners in AFib

One of the main risks of atrial fibrillation is blood pooling because it's not moving forward, increasing the chances of blood formation. Blood thinners are medications that reduce and prevent clot formation by acting as "anti-clotting" mechanisms.

Stroke is the most severe complication of blood clots that people with an AFib face. If a clot moves through your body and advances to the brain, it can block an artery and cause an ischemic stroke.

All blood thinners can reduce the chance of a stoke because of their ability to limit the potential for clot creation. Blood thinners stop clots from increasing in size as well as preventing the formation of new clots.

Blood thinners limit other complications that arise from clots. However, the downside is that they can trigger blood to seep into the brain, which can result in a bleeding (hemorrhagic) stroke.

However, new drugs such as Pradaxa, Xarelto, Eliquis, and Savaysa lower the rates of both types of strokes better than older medications like Coumadin.

### Types of Blood Thinners

Blood-thinning medications fall into two categories: anticoagulants and antiplatelets.

Anticoagulants inhibit the production of the blood' s natural clotting elements. Some common anticoagulants currently used for AFib are:

- Coumadin
- Eliquis
- Pradaxa
- Savaysa
- Xarelto

Antiplatelet medications work in the arterial circulation to prevent blood clot formation. These drugs interfere with the bloodstream platelets' ability to stick together.

The following are the antiplatelet drugs most often prescribed:

- Aspirin
- Brilinta
- Effient
- Plavix

**Which AFib Patients Should Receive Blood Thinners?**

Blood thinners are preventative drugs used to stop a stroke from occurring. They can cause bleeding and don't have any effect on symptoms of AFib.

As a result, up to 50 percent of the people with AFib who could benefit from these medications don't take one. According to an article on the American College of Cardiology's Cardiosmart website, individuals with AFib have five times higher stroke risk than people with a regular heart rhythm.

Moreover, AFib – connected strokes are frequently more severe than those resulting from other causes.

If you have AFib, talk with your healthcare team to find out if you are a candidate for a blood thinner, and which one will work best for you. Your team has several tools they can use to determine whether one of these medications is appropriate for you.

Your physician will use the CHA2DS2-VASc risk assessment scale to determine if you need to take a blood thinner. The table listed below shows the criteria used to calculate your score:

| **Risk Factor** | **Points** |
|---|---|
| **C**ongestive Heart Failure | 1 |
| **H**igh Blood Pressure | 1 |
| **A2**: > 75 years old | 2 |
| **D**iabetes (type 2) | 1 |
| **S**troke or Mini-Stroke | 2 |
| **V**ascular Disease (heart attack, peripheral artery disease) | 1 |
| **A**ge: 65-74 years old | 1 |
| **Sc**: Female Sex | 1 |

The greater your score, the more significant your risk of stroke, and the more likely you will need a blood thinning medication.

All people with AFib don't always need blood thinners:

- Those with implanted pacemakers and defibrillators may not need to take one.
- Recent research conducted by Dr. Steven Swiryn, a clinical professor of cardiology at Northwestern University in Chicago's Feinberg School of Medicine demonstrated that people experiencing brief bursts of AFib don't have enough of a stroke risk to require blood thinners.

**What Do I Need to Know About My Blood Thinner Medication?**

Some patients will need to be on blood thinners for life, while others will only need one for a short time. If your physician prescribes a blood thinner for you, have a list of questions to ask your doctor about the new medication, including:

- What over-the-counter pain relievers are safe for me to use?
- How will the blood thinner affect the other medications I’m taking?
- What dietary changes, if any, will I need to make?
- What is the most significant risk of this specific blood thinner?
- Does this medication require regular lab tests to ensure the dosage is correct for me?
- What adverse side effects and symptoms do I need to watch?
- How long is it required for me to take this medication?
- What time of day should I take my blood thinner?
- If I must take this drug for life, is it possible to have the dosage reduced in the future?
- Can I take supplements or herbal remedies with this medication, and if so which ones?
- Will I still need to take a blood thinner if I have a procedure such as ablation or cardioversion?
- What is the dosage and frequency that I need to take this medication?

If you decide to stop your blood thinners for any reason, always consult with your physician before making any changes.

**Precautions to Consider When Taking a Blood Thinner**

There are some extra safety precautions to keep in mind when you are taking a thinning blood medication:

- Contact your physician immediately if you experienced unexplained bruising or bleeding
- Consistently follow your prescribed medication dosage, frequency, and lab testing schedule
- Wear a helmet with activities that could lead to a head injury
- Avoid engaging in extreme sports
- Incorporate a fall prevention plan in your home by ensuring every room is well lit, remove clutter, and provide walking surfaces that are slip resistant.

Current research estimates that 75 percent AFib-related strokes are preventable when individuals take a blood thinning medication.

Your physician and your medical team will work with you to develop an effective atrial fibrillation and blood thinner regimen. Your plan will assess both your health profile and medication costs, and will significantly reduce your risk of a stroke or other blood clot – connected complication.