What Are Anticoagulants and Antiplatelet Agents?

Anticoagulants and antiplatelet agents are medicines that reduce blood clotting in an artery, a vein or the heart. Blood clots can block the blood flow to your heart muscle and cause a heart attack. They can also block blood flow to your brain, causing a stroke.

What should I know about anticoagulants?

Anticoagulants (or sometimes known as “blood thinners”) are medicines that delay the clotting of blood. Examples are heparin, warfarin, dabigitran, apixaban, and rivoraxaban.

Anticoagulants make it harder for clots to form or keep existing clots from growing in your heart, veins or arteries. Treatment should be managed by your healthcare provider.

- Follow your doctor’s (or other healthcare provider’s) instructions.
- If you take warfarin or heparin, have regular blood tests so your doctor can tell how the medicine is working.
  - The test for people on warfarin is called a prothrombin time (PT) or International Normalized Ratio (INR) test.
  - The test for persons on heparin is called an activated partial thromboplastin time (aPTT) test.
- Never take aspirin with anticoagulants unless your doctor tells you to.
- You must tell other healthcare providers that you’re taking anticoagulants.
- Always check with your doctor before taking other medicines or supplements, such as aspirin, vitamins, cold medicine, pain medicine, sleeping pills or antibiotics. These can affect the way anticoagulants work by strengthening or weakening them.
  - Let your doctor know if you have been started on any new medications that might interfere with the action of warfarin.
  - Discuss your diet with your healthcare providers. Foods rich in Vitamin K can reduce the effectiveness of warfarin. Vitamin K is found in leafy, green vegetables, fish, liver, lentils, soybeans, and some vegetable oils.
  - Tell your family that you take anticoagulant medicine and carry your emergency medical ID card with you.

Could anticoagulants cause problems?

If you do as your doctor tells you, there probably won’t be problems. But you must tell your doctor right away if:

- Your urine turns red or dark brown. This could be a sign of urinary tract bleeding.
- Your stools turn red, dark brown or black. This could be a sign of intestinal bleeding.
• You bleed more than normal when you have your period.
• Your gums bleed.
• You have a very bad headache or stomach pain that doesn’t go away.
• You get sick or feel weak, faint or dizzy.
• You think you’re pregnant.
• You often find bruises or blood blisters.
• You have an accident of any kind.

What should I know about antiplatelet agents?
Antiplatelet medicines keep blood clots from forming by preventing blood platelets from sticking together.

Many heart attack and stroke patients — and people seeking to avoid these events — are treated with two types of antiplatelet agents to prevent blood clotting; aspirin and a P2Y\textsubscript{12} inhibitor. This is called dual antiplatelet therapy (DAPT).

Almost everyone with coronary artery disease, including those who have had a heart attack, stent, or CABG, are treated with aspirin for the rest of their lives.

P2Y\textsubscript{12} inhibitors are usually prescribed for months or years in addition to the aspirin therapy. You may be prescribed one of three of these medications — clopidogrel, prasugrel, or ticagrelor. Prasugrel should not be prescribed if you have had a stroke or a transient ischemic attack (TIA). Which one of these your doctor prescribes will be based on what he or she feels is best for you, based on your risk of blood clots and bleeding.

Do I need to wear an emergency medical ID?
Yes, always keep it with you. Wear it on your person or keep it in your purse or wallet. It needs to include:
• The name of the drugs you’re taking.
• Your name, phone number and address.
• The name, address and phone number of your doctor.