Anticoagulants (Warfarin & DOACs)

NICE NG196 (2021) | MHRA Drug Safety Update | BNF

HEADLINE: Critical Safety Warning

- ☐ Biggest trap: patient stops anticoagulant before dental treatment or surgery without telling the prescriber.
- ☐ Because DOACs have short durations of action, missed doses can rapidly reduce anticoagulant protection.
- ☐ Never advise stopping anticoagulation without guidance from the clinician managing treatment.

FIRST DISPENSE: Safety Checks

- ☐ Warfarin: issue yellow anticoagulant treatment booklet. Advise patient to carry it to all appointments.
- ☐ DOACs: issue and explain the anticoagulant patient alert card for the medicine and local practice.
- ☐ Warfarin baseline: INR, full blood count, renal function, liver function, blood pressure.
- ☐ DOACs baseline: Cockcroft-Gault CrCl (not eGFR alone), liver function, weight, and indication.

Script: "Do not stop anticoagulants before dental or surgical procedures unless specifically advised by the clinician managing your anticoagulation. If you miss a dose, check your patient leaflet or ask your pharmacist. Seek urgent help if bleeding will not stop."

Key Drug and Food Interactions

Drug / Food	Drug Affected	Risk
Metronidazole, fluconazole, ciprofloxacin, trimethoprim, co-trimoxazole	Warfarin	Raised INR; check 3-5 days after starting
NSAIDs / ibuprofen	Warfarin	Increased bleeding; avoid where possible
St John's Wort	DOACs	Reduces levels; avoid
Ketoconazole, clarithromycin, ritonavir	DOACs	May increase bleeding risk
Heavy or binge alcohol	All	Increased bleeding risk

REPEAT DISPENSE: Screen and Monitor

- ☐ Warfarin: record INR, date, dose, target range. If INR unavailable, contact anticoagulation service or follow local protocol.
- ☐ DOACs: renal function at least annually; more frequently in older, frail, or renally impaired patients per local guidance.
- ☐ Ask: "Any unusual bleeding: cuts, bruising, blood in urine, or black stools?"
- ☐ Ask: "Any new medicines, antibiotics, supplements, or herbal remedies since last supply?"
- ☐ Ask: "Have you missed any doses or changed when you take it?"
- ☐ Dental treatment and surgery: interruption only under specialist guidance.

RED FLAGS: Seek Emergency Assessment

- ☐ Vomiting or coughing blood: call 999.
- ☐ Black, tarry, or bloody stools: call 999 or go immediately to emergency care.
- ☐ Heavy uncontrolled bleeding not stopping after 10 minutes: call 999.
- ☐ Head injury on warfarin or DOAC: seek urgent emergency assessment even if mild, even without loss of consciousness.
- ☐ Sudden severe headache, facial drooping, arm weakness, or slurred speech: call 999.
- ☐ Significant blood in urine with clots or difficulty passing: seek urgent assessment.
- ☐ Sudden loss of vision in one or both eyes: call 999.

Key reminders: Pregnancy: warfarin is teratogenic; DOACs generally avoided. Refer urgently. Falls risk: consider referral if recurrent falls. Rivaroxaban 15/20mg must be taken with food. Dehydration or acute illness may increase DOAC exposure.

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