

Common questions about taking an anticoagulant with atrial fibrillation



These medications help reduce stroke risk if you have atrial fibrillation. Discuss the benefits and risks of taking them with your healthcare professional.

QUESTION	RESPONSE
<i>Why do I need an anticoagulant? I don't feel sick.</i>	Atrial fibrillation causes blood to pool in the top chamber of the heart, which can cause blood clots to form. These blood clots can travel to the brain, causing a stroke. Taking an anticoagulant reduces your risk of a devastating stroke by half.
<i>Do anticoagulants increase bleeding?</i>	Bleeding is a common side effect of anticoagulants. For most patients, bleeding is minor (e.g., bruising, nosebleeds). Major bleeding occurs in less than half of patients with any bleeding. Generally, the benefit of using anticoagulants to prevent stroke far outweighs the risk of bleeding.
<i>Can anticoagulants cause a brain bleed?</i>	The rate of brain bleed in patients taking anticoagulants is very low —about 0.1-0.6% a year, or 1-6 out of 1,000. At the same time, anticoagulants can greatly reduce the likelihood of having a stroke , which is a much higher risk (1-10% per year).
<i>What if I don't want to take warfarin?</i>	Direct oral anticoagulants, or DOACs, work differently than warfarin , and many come with a lower risk of bleeding while still being effective at preventing stroke. Examples include Eliquis (apixaban), Xarelto (rivaroxaban), Savaysa (edoxaban), and Pradaxa (dabigatran).
<i>Is taking an anticoagulant inconvenient?</i>	Unlike warfarin, DOACs do not require frequent lab monitoring or dietary restrictions, but they do need to be taken every day . It is important to find a way to remember to take your medication as prescribed to best protect you against strokes.
<i>Is it expensive to take an anticoagulant?</i>	A variety of options are available , and usually at least one option will be covered by insurance.



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