



IS ANTICOAGULATION RIGHT FOR YOU?

Your doctor told you that you have atrial fibrillation and an irregular heartbeat, and you now have a higher risk of stroke because the condition increases the likelihood of blood clots.

If a blood clot travels to your brain, it could cause a stroke. Anticoagulants, which reduce blood clotting, can significantly reduce that risk. However, as with any medication, anticoagulants carry risks, the most worrisome of which is bleeding into the stomach or brain. Together, you and your doctor need to weigh that risk against the benefits of preventing a stroke.



SO, YOU HAVE 2 DECISIONS TO MAKE: **Should I take an anticoagulant?** **If I decide to take an anticoagulant, which one should I take?**

ASSESSING YOUR RISK OF STROKE AND BLEEDING

Not everyone with atrial fibrillation has the same risk of stroke.

Your risk is higher if you:

- Have high blood pressure
- Have diabetes
- Have a history of stroke or "mini-stroke"
- Are 65 or older
- Have another type of heart or vascular disease
- Are female

Your doctor can identify additional factors to consider and help you understand your own risk of bleeding.

After you understand your risk of stroke, you next need to understand your risk of bleeding.

Your risk is higher if you:

- Have high blood pressure
- Have any kidney or liver problems
- Have had one or more previous bleeding episodes
- Are older than age 65
- Frequently use anti-inflammatory medications like aspirin, naproxen, or ibuprofen
- Are a heavy drinker
- Have had a previous stroke

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WHICH ANTICOAGULANT SHOULD I TAKE?

If you and your doctor decide that anticoagulation is best for you, the next step is choosing the right anticoagulant. There are 7 options: aspirin and the prescription medications warfarin (Coumadin[®]), clopidogrel (Plavix[®]), dabigatran (Pradaxa[®]), rivaroxaban (Xarelto[®]), apixaban (Eliquis[®]), and edoxaban (Savaysa[™]).

Your doctor may recommend aspirin plus clopidogrel. Aspirin is generally reserved for those who are at very low risk of stroke, while clopidogrel is typically used for those at higher risk who cannot take warfarin.

Most people with atrial fibrillation will take warfarin, dabigatran, rivaroxaban, apixaban, or edoxaban, which studies find are the most effective at preventing stroke with the lowest risk of bleeding.

The table below shows information about each anticoagulant. Make sure you discuss the pros and cons of each medication with your doctor so you fully understand the risks and benefits for you.

	Aspirin	Clopidogrel	Warfarin	Dabigatran	Rivaroxaban	Apixaban	Edoxaban
Dosing (all are taken by mouth)	Once a day	Once a day	Once a day	Twice a day	Once a day	Twice a day	Once a day
Requires regular monitoring with blood tests	No	No	Yes	No ^a	No ^a	No ^a	No ^a
Interactions with food	None	None	Foods high in vitamin K, such as kale, chard, spinach, certain beans, liver, and other fruits, vegetables, and nuts	None	Must be taken with food	None	None
Interactions with medications	Fewer when compared to warfarin	Fewer when compared to warfarin	Many, but dose can be adjusted to compensate	Fewer when compared to warfarin			
Doctors have experience with reversing the effect of the medication if bleeding occurs	No	No	Yes	No	No	No	No
Cost ^b	Inexpensive	Inexpensive	Inexpensive	More expensive than warfarin and requires a higher copayment ^c	More expensive than warfarin and requires a higher copayment ^c	More expensive than warfarin and requires a higher copayment ^c	More expensive than warfarin and requires a higher copayment ^c
Other	More than 50 years of experience	More than 50 years of experience	More than 50 years of experience	Limited experience in the "real world" compared to warfarin	Limited experience in the "real world" compared to warfarin	Limited experience in the "real world" compared to warfarin	Limited experience in the "real world" compared to warfarin

In the end, the decision to take an anticoagulant, and the choice of which anticoagulant to use, is an individual one that you and your doctor should make together.

^aYour doctor may order blood tests to adjust the dose of your medication if you are taking other interacting medications and/or have kidney or liver problems.

^bMost insurance plans, including Medicare, cover these medications.

^cPatient assistance programs are available.