

Atrial Fibrillation (AFib) Treatment Adherence

Following your treatment plan will reduce your risk of AFib-related stroke.



More than three million Americans have atrial fibrillation (AFib), which is the most common heart rhythm disorder. AFib is caused by chaotic electrical signals in the heart. These chaotic electrical signals make the upper chambers of the heart (the atria) quiver, instead of properly squeezing (contracting). If AFib is not treated, blood can pool in the atria and cause blood clots to form. If a blood clot breaks free,

it can enter the bloodstream and cause a stroke. A stroke means that oxygen-rich blood can't get to the brain. Brain cells that don't receive oxygen can die or become damaged.

Health care providers can estimate your risk of having a stroke using your age, sex, and other medical conditions, such as high blood pressure (hypertension), heart failure, diabetes, and problems with your arteries or veins (vascular disease). A stroke or mini stroke in the past also increases the risk of having another stroke.

Preventing Strokes

Based on your personal risk, your health care provider may recommend taking a blood-thinning medication to reduce the risk of having a stroke from AFib. These blood-thinning medications are called anticoagulants. There are several types of anticoagulant medications. While they all work a bit differently, all anticoagulants reduce the risk of blood clots from forming in your heart. In this way, anticoagulants reduce the risk of a stroke.

Anticoagulants work the best when taken exactly as prescribed. If you don't take the right amount of anticoagulant medication and your blood is not thin enough, you could have a stroke. If your blood is too thin, you could have dangerous bleeding. To avoid these complications, it is very important to be "adherent" to your treatment plan.



What is Adherence?

Adherence means "sticking to" or "being faithful with" taking medication exactly as your health care provider says and having blood tests and follow-up visits as instructed. On average, this means taking 90 - 100% of your medication each month. Nine out of 10 people with AFib who go to the emergency room because of a stroke are not taking an anticoagulant, or are not taking their anticoagulant medication regularly. Patients who don't take the proper amount of anticoagulant medication are more than six times as likely to have a stroke and about four times as likely to have dangerous bleeding. Being adherent to your anticoagulation treatment plan-taking the medication exactly as your health care provider prescribes is the best thing you can do to reduce your risk of having a lifethreatening or disabling stroke.

Patients who are adherent to their anticoagulant treatment plan also have a much smaller chance of dangerous bleeding.

Adherence can be difficult for many reasons. Some of the most common reasons are:

- Forgetting to take the medication,
- Trying to avoid side effects of the medication, and
- The cost of the medication.

Reminders for Taking Medication

Using pillboxes (if appropriate for your specific medication) or marking on a calendar or chart that the medication has been taken can be helpful. Some patients use the alarm clock feature on their cell phones to remind them to take their medication at the same time every day. You should speak to your healthcare provider about other ways to make sure that you take your medication as prescribed.



Side Effects

You should speak to your health care provider about possible side effects of any medication. It's a good idea to make a plan with your health care provider for what you should do if you think you have a side effect from the medication. Unless a health care provider tells you otherwise, you should always take your anticoagulant medication as planned to reduce your risk of stroke.

Medication Cost

Your health care provider's office may also be able to answer your questions about the cost of the medication and whether different payment options are available. Difficulty paying for medication is a reason some patients do not adhere to treatment plans, so cost may be an important consideration for your choice of anticoagulant drug.

There are specific adherence considerations for every type of anticoagulant medication. Some of these are outlined in the table on the following page.

Medication	Drug-Specific Adherence Considerations
Direct Thrombin Inhibitors Dabigatran (Pradaxa®)	This medication comes as a capsule, which should never be opened. Importantly, unlike other medications , this medication should be stored in the original container and not in a pillbox. Not following these instructions could result in you receiving an overdose of the medication. In some patients, this medication may cause "reflux" or "heartburn." If this occurs, it is important to discuss this with your health care provider or pharmacist before changing how you take the medication or before taking any over-the-counter remedies, which may decrease how well this anticoagulant medication works to reduce the risk of stroke.
Factor Xa Inhibitors Apixaban (Eliquis®) Edoxaban (Savaysa®) Rivaroxaban (Xarelto®)	Rivaroxaban (Xarelto®) needs to be taken with food, preferably the largest meal of the day, to ensure that your body absorbs all of the medication, so that it can work to prevent strokes.
Vitamin K Antagonists Warfarin (Coumadin® or Jantoven®)	You should take all the doses of warfarin that your health care provider prescribes. While this is important with all medications, it is especially key for warfarin, as it can take a week or longer for the medication to build back up in your system after missing just one dose. How well warfarin works can be affected by what you eat and drink, your activity levels, and other medications. Tell your health care provider about your diet and let all of your providers know that you are taking warfarin, especially when they want to prescribe a new medication. It is important to know your "INR" number. The INR is the test that measures how well warfarin is working. Complications are more common when the INR is below 2.0 (a stroke could happen) or above 3.0 (dangerous bleeding could happen.)

Being open and honest with your health care provider or pharmacist about problems or concerns is very important. For instance, if you're worried that you won't be able to do certain activities or eat your favorite food, you should let your health care team know. Your health care team wants to create the best treatment plan for you—a plan that you can follow. They want to make sure that the anticoagulant medication you take is both safe and effective for you and fits your lifestyle as well as possible.

If you have been diagnosed with AFib, contact your health care provider to find out your personal risk for stroke.

Talking to Your Health Care Provider

Taking your anticoagulant medication as directed is the most important thing you can do to reduce your risk of having a stroke. The questions below may help you talk to your health care provider and learn things you should do to make sure that the anticoagulant medication works well for you.

☐ What is a treatment plan?
☐ Should I give copies of my treatment plan to my family or caregivers?
☐ Does it matter when I take my medication?
☐ Do I need to record when I take my medication?
☐ Do I need to record what I eat and drink?
☐ Am I allowed to have beer or wine?
☐ Is it OK to take a daily vitamin or other supplements like St. John's wort?
☐ Do I need to have blood tests to check my anticoagulant medication? If so, how often, and who will instruct me on how to adjust my medications based on those results?
☐ If I forget to take my anticoagulant medication, what do I do?
☐ If I take two doses by mistake what do I do?
☐ Who do I need to notify if I am going to the dentist or having a medical procedure?
☐ What if I can't reach you on the phone? Can someone at your office answer my questions?
☐ How often should I see you to make sure that everything is going OK?