

PATIENT INFORMATION LEAFLET

RIVAROXABAN FOR THE TREATMENT OF ATRIAL FIBRILLATION

- **How do I store my tablets?**

Do not take your tablets if the expiry date has passed (you can find this information on the tablet box). Keep the tablets in their original packaging and store them in a dry place below 25°C. Keep all medicines well out of the reach of children – it is best to lock them in a cupboard or medicine cabinet. Rivaroxaban may be re-dispensed in a compliance aid or blister pack.

- **Will rivaroxaban interact with other medicines, food, or alcohol?**

There are no known interactions with specific foods or alcohol. However, excessive alcohol consumption can increase your risk of bleeding, so it is advisable not to drink more than 14 units each week. There are some medicines that rivaroxaban does interact with so please let anybody prescribing you medicines know the names of all medications you are taking (including prescription and over-the-counter medicines, vitamins and herbal supplements).

- **Should I stop taking rivaroxaban if I am going to have a dental or medical procedure?**

Do not stop taking rivaroxaban without first talking to your doctor dentist. Rivaroxaban may need to be stopped for one or more days before any planned surgery, dental or medical procedure.

You will receive a rivaroxaban alert (contained within the tablet box). This should be carried with you at all times.

People with atrial fibrillation have a five times higher risk of having a stroke. If you have atrial fibrillation, your doctor should assess your individual risk of a stroke and discuss whether you should be started on medication to reduce this risk.

- **What is rivaroxaban for?**

Rivaroxaban (Xarelto®) is an anticoagulant, sometimes referred to as a 'blood thinner', used to lower the risk of blood clots developing in people who have atrial fibrillation (an irregular heart beat) and other risk factors for stroke. Having atrial fibrillation increases the risk of a blood clot forming in the heart. If this clot travels to the brain, it may cause a stroke. Taking rivaroxaban slows down the time it takes for your blood to clot and reduces the risk of this happening.

- **For people with atrial fibrillation, is it worth changing to rivaroxaban from warfarin?**

Warfarin has been prescribed for more than 60 years so there is plenty of experience of its clinical use. There is evidence that rivaroxaban is as effective as warfarin at preventing a stroke with a smaller chance of major bleeding. If warfarin is not well controlled, your GP or healthcare specialist may recommend changing from warfarin to reduce the risk of stroke or bleeding.

- **Does rivaroxaban cause less bleeding than warfarin?**

As both rivaroxaban and warfarin affect blood clotting, people may still experience side effects such as bruising and bleeding.

Evidence has shown that rivaroxaban has a lower risk of intracranial bleeding (bleeding into the brain) than warfarin. Intracranial bleeding

(bleeding into the brain) is worrying because it is usually very serious. Gastrointestinal (stomach and bowel) bleeding varies widely in terms of severity and is more common. Evidence shows that rivaroxaban caused more gastrointestinal symptoms than warfarin (e.g., indigestion, stomach-ache). There was more nosebleeds and cases of people getting blood in their urine with rivaroxaban compared to warfarin.

- **In the event of excessive bleeding, can the effect of rivaroxaban be reversed?**

There is a drug called Andexanet alfa that can be used to reverse gastrointestinal bleeding in people taking rivaroxaban. If urgent treatment is required for bleeding, rivaroxaban will be discontinued, and you may be given this drug.

- **Are regular blood tests needed to monitor rivaroxaban?**

There is no need for regular blood tests with rivaroxaban. However, a blood test is needed to measure how well the kidneys and liver are working before starting treatment and then at least once a year whilst on treatment.

- **When and how do I take this medicine?**

Always take this medicine as your doctor has told you. If you do not take rivaroxaban regularly it will not be effective and your risk of having a stroke will increase.

The dose is usually 20mg once a day. A reduced dose (15mg once a day) may be prescribed in some circumstances such as poor kidney function and prescription of other medications.

Rivaroxaban should be taken with a meal preferably with water.

- **What are the possible side effects of this medicine?**

As this medicine slows down the time it takes for your blood to clot, most side effects are related to bruising or bleeding. Tell your doctor immediately if you experience any of the following: prolonged or excessive bleeding, exceptional weakness, tiredness, paleness,

dizziness, headache, or unexplained swelling. Also report if there is any blood in your urine or if you pass black tarry or blood-stained stools.

You should seek urgent medical attention if you fall or injure yourself whilst taking rivaroxaban, especially if you hit your head, due to the increased risk of bleeding.

- **What should I do if I forget to take a dose?**

It is important not to skip doses. If a dose is missed, you should take rivaroxaban immediately and continue once daily dosing on the following day. The dose should not be doubled within the same day to make up for a missed dose.

- **What should I do if I take too many tablets?**

If you have taken more tablets than your prescription states, you are at a higher risk of bleeding. Contact your doctor immediately. Take your medication with you to show the doctor.