

**Xarelto<sup>®</sup>**  
**XPRT**

# A PATIENT'S GUIDE TO STROKE AND ATRIAL FIBRILLATION (AF)



This medicine is subject to additional monitoring. This will allow quick identification of new safety information. If you get any side effects, talk to your doctor, pharmacist or nurse. This includes any possible side effects not listed in the package leaflet. You can also report side effects directly via the Yellow Card Scheme at [www.mhra.gov.uk/yellowcard](http://www.mhra.gov.uk/yellowcard). By reporting side effects you can help provide more information on the safety of this medicine.

## Personal Information

Name:

---

Contact details:

---

Emergency contact details:

---

Name of consultant:

---

GP surgery:

---

# FOREWORD

**It is human nature to have questions when we come across or try something new. When something new is related to our health, it's even more important that we have access to the information we need to enable us to feel comfortable.**

If you are preparing for treatment with Xarelto (rivaroxaban) for the prevention of stroke in atrial fibrillation (AF), you are likely to be curious as to what it is, how it works and how often you will need to take your medication.

Working in collaboration with key patient organisations, Bayer HealthCare have developed *Xarelto Xpert*, to help you understand and better manage your condition. By following our five step plan this leaflet will help you become an 'expert' by:

- **X**ploring your condition
- **P**roviding you with information on Xarelto and how it works
- **E**xplaining how to take Xarelto
- **R**evealing answers to frequently asked questions
- **T**aking you to other useful sources of information

We hope this leaflet helps you to feel confident about taking the next step in your treatment journey with Xarelto. Please read the Patient Information Leaflet for further information on Xarelto.

# WHAT IS AF?



**AF is a heart condition – more specifically a type of irregular heartbeat. It means your heart is not working as well as it should be and may make you more likely to have a stroke.**

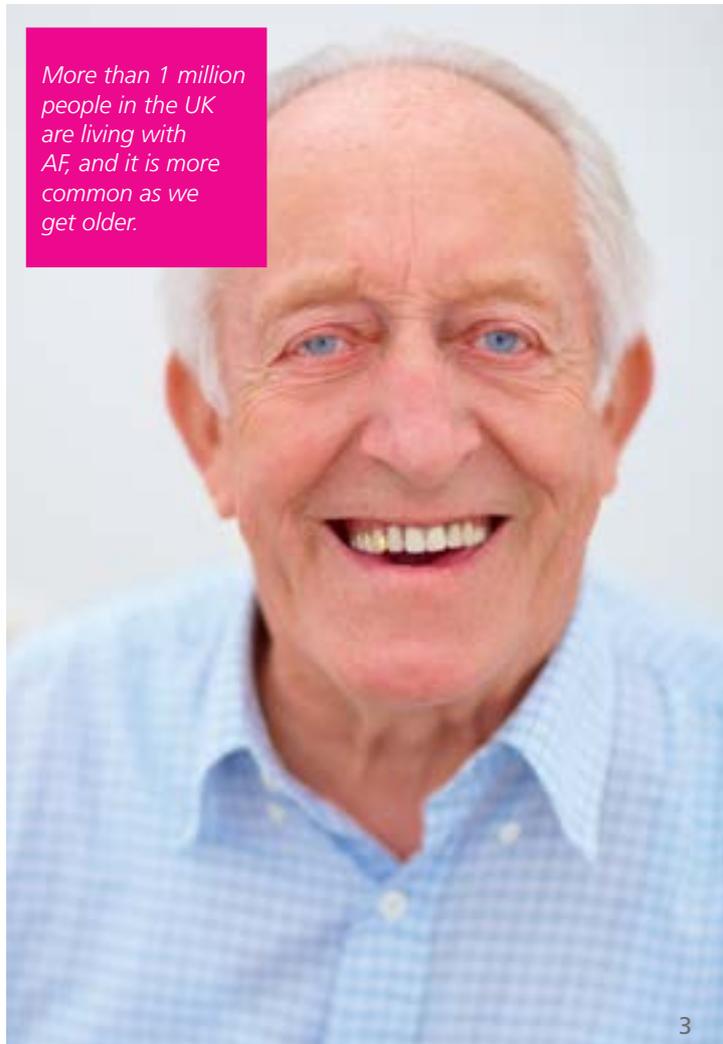
**More than 1 million people in the UK are living with AF, and it is more common as we get older.<sup>1</sup>**

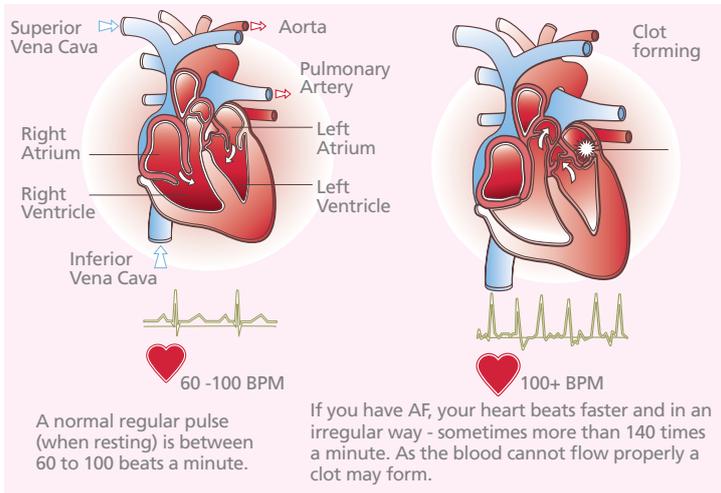
## **What is a stroke?**

A stroke happens when the blood supply to part of the brain is cut off. This could be due to a blockage in an artery (ischaemic stroke) or by bleeding in the brain (haemorrhagic stroke). A transient ischemic attack (TIA) or mini stroke is similar to a stroke, but the symptoms are temporary.

Stroke is a debilitating disease which can affect bodily functions, thought processes, learning abilities, and how to feel and communicate. The effect of strokes are sudden and symptoms include feeling numb, weak or paralysed on one side of the body, slurred speech and difficulty in finding words or understanding speech. Some people lose their sight or have blurred vision, and others become confused or unsteady.

*More than 1 million people in the UK are living with AF, and it is more common as we get older.*





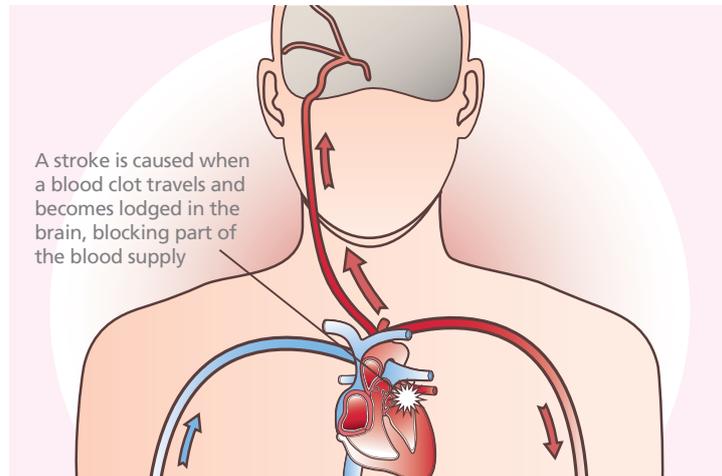
The diagrams above explain how a stroke can occur in people that have been diagnosed with AF.

### How is AF linked to stroke?

Your heart is a muscle and its job is to pump blood around the body – this pumping action creates your pulse. A normal pulse (when resting) is regular and between 60 to 100 beats a minute. If you have AF, your heart has episodes where it beats faster and in an irregular way – sometimes more than 140 times a minute. You can measure your heart rate by feeling the pulse in your wrist or neck.

If you have a fast or irregular heartbeat, your heart may not have a chance to relax and empty itself of blood properly before filling up again. As a result, the blood does not move quickly and smoothly, and can form clots. If these blood clots then travel in the blood stream to the brain, they could block the blood flow to part of your brain and cause a stroke or TIA.

The diagrams above help explain this process.



As you have been diagnosed with AF, your doctor will assess your personal risk of stroke. One method your doctor may use is the CHA<sub>2</sub>DS<sub>2</sub>-VASc scoring system below:

CHA <sub>2</sub> DS <sub>2</sub> -VASc and how it is calculated		
C	Congestive cardiac failure	1 point
H	Hypertension	1 point
A2	Age greater than 75 years	2 points
D	Diabetes	1 point
S2	Stroke or TIA/thromboembolism	2 points
V	Vascular disease	1 point
A	Age 65-74	1 point
Sc	Sex (i.e. female)	1 point

The CHA<sub>2</sub>DS<sub>2</sub>-VASc scoring system is used to assess whether anticoagulation medicine (a type of drug that slows down your body's ability to clot, therefore reducing the likelihood of clots forming), is required. Treatment is recommended when your score is two or more, however in some instances treatment may even be recommended with a score of below two. Your doctor will decide your personalised treatment plan depending on your stroke risk.



### What are the causes and symptoms of AF?

The causes of AF are not completely understood, but it is age related – the older you become the more likely you are to develop AF. However, it is more likely to occur in patients who have other heart conditions, such as:

- high blood pressure
- heart disease (coronary artery disease)
- some forms of heart valve diseases.

Many people with AF have no symptoms and it is only discovered during a routine medical examination or after a health problem. However, for those who do, the most common symptoms are:

- palpitations (or awareness of the heartbeat) which may be beating very fast
- tiredness
- shortness of breath
- dizziness
- chest pain.

### Are there different types of AF?

In the early stages of disease, AF can come and go without warning. There could be long spells between 'episodes' as well as cases where people in this early stage of disease may not even be aware they have it.

### The three main types of AF are:

- **Paroxysmal AF:** when a person lapses into AF and then returns to sinus rhythm within seven days without intervention
- **Persistent AF:** when a person lapses into AF for a period in excess of seven days and less than one year (or immediately after treatment to correct the AF) – in this setting a return to sinus rhythm should be anticipated through intervention
- **Long standing persistent AF:** when a person lapses into AF for an excess of a year and does not respond to interventional therapy to return to sinus rhythm. This may also be referred to as permanent or sustained AF

**The risk of having a stroke is increased with all types of AF.**

### What are the treatments for AF?

The treatment of AF varies from person to person as it depends on the type of AF you have been diagnosed with, your age, symptoms, whether you have other health problems and your overall health in general. Anti-arrhythmic drugs are used to control the rate and rhythm the heart beats, and other heart procedures may be considered. Your doctor will discuss your treatment options with you.

**Xarelto will not treat your AF so you should continue to take your current medication used to manage your heart rate as prescribed by your doctor.**

# A STEP-BY-STEP GUIDE TO XARELTO

Xarelto will not treat your AF so you should continue to take your current medication used to manage your heart rate as prescribed by your doctor.

## What is Xarelto?

Xarelto is an anticoagulant, which is a type of medication that slows down your body's ability to clot, therefore reducing the likelihood of dangerous blood clots forming. As you have been diagnosed with AF, you have an increased risk of developing a blood clot. You have been prescribed Xarelto to help prevent these clots forming and travelling to the brain, ultimately causing a disabling stroke.

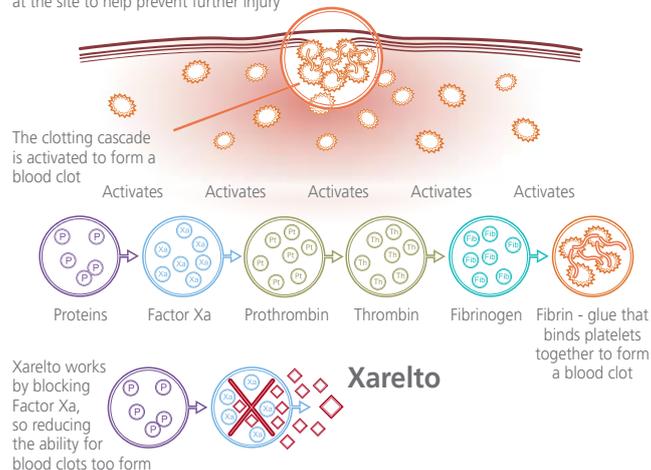
Treatment is recommended when your score is two or more, however in some instances treatment may even be recommended with a score of below two.

## How does Xarelto work?

The formation of a blood clot is a natural process (called the clotting cascade) within your body. For example, when you cut yourself, you will see a clot form to stop the bleeding. Xarelto belongs to a group of medicines called antithrombotic agents. It works by blocking a specific protein in the blood – Factor Xa ('ten A') – which is known to play a key role in starting the blood clotting cascade process.

Blocking Factor Xa prevents the formation of subsequent proteins that are also involved in the clotting cascade, so reducing the tendency for blood clots to form.

When the lining of the blood vessel becomes damaged, platelets are activated at the site to help prevent further injury



The illustration above will help you better understand how Xarelto works.

## How is Xarelto taken?

Xarelto is taken by mouth (orally) and the usual dose for the prevention of strokes in AF is one 20mg tablet once a day. The tablet should be swallowed whole, preferably with water, and must be taken together with a meal. Try to take it at the same time each day to help you remember it. For patients with reduced kidney function dosing is one 15mg tablet once a day, which must be taken together with a meal.

A recent study showed that 80% of AF patients would prefer to take anticoagulation once daily.<sup>2</sup>

Xarelto is used to treat different patients for different reasons. Another person prescribed Xarelto may take a different dose from you. Always take Xarelto exactly as your doctor has told you and check with your doctor or pharmacist if you are unsure of your correct dose.

# YOUR XARELTO

## QUESTIONS ANSWERED

### ***What do I do if I miss a dose of Xarelto?***

If you have missed a dose of Xarelto take a tablet as soon as you remember it. Take the next tablet the following day and then carry on taking one tablet once a day.

Do not take two tablets in one day to make up for the missed dose.

### ***What do I do if I take too much Xarelto?***

If you have taken too many Xarelto tablets contact your doctor immediately as taking too many may increase your risk of bleeding.

### ***How long will I be treated with Xarelto?***

Length of treatment with Xarelto is based on an individual assessment of your risk factors and the benefits of long term preventative treatment. Your doctor will discuss this with you and together agree the most appropriate length of treatment.

### ***What are the most common side effects of Xarelto?***

Like all medicines, Xarelto can cause side effects. As we are all different these will vary from one person to another.

As Xarelto is an anticoagulant medicine that slows down your body's ability to clot, a common side effect is an increased risk of bleeding – either external, visible blood loss or internal bleeding inside the body.

Symptoms of bleeding include:

- pain
- swelling or discomfort
- headache, dizziness or weakness
- unusual bruising, nosebleeds, bleeding of gums, cuts that take a long time to stop bleeding
- menstrual flow or vaginal bleeding that is heavier than normal
- blood in your urine which may be pink or brown, red or black stools
- coughing up blood, or vomiting blood or material that looks like coffee grounds.

**If you have any symptoms of bleeding, tell your doctor or visit your nearest A&E department immediately so that you can be monitored and have your treatment assessed.**

**For a full list of possible side effects, please refer to the Patient Information Leaflet provided with your Xarelto tablets. If you think you are experiencing side effects from Xarelto at any time, contact your doctor or pharmacist immediately for advice.**

**Please remember to take Xarelto every day – missing a dose will increase your risk of having a stroke.**

### ***Will I bleed more if I have a cut whilst taking Xarelto?***

As Xarelto slows down your body's ability to clot, bleeding is a common side effect. However, if you experience excessive bleeding, tell your doctor immediately.

### ***What happens if I need to have dental treatment or need to have an operation whilst I am taking Xarelto?***

As Xarelto may increase your risk of bleeding it is important that you tell your dentist or doctor that you are taking Xarelto before any dental treatment or operations. A patient alert card is provided at the back of this leaflet which you should carry with you at all times and show in advance of any dental treatments/operations to ensure you are treated appropriately.

# YOUR XARELTO QUESTIONS ANSWERED

## *Will I be monitored during treatment with Xarelto?*

Novel oral anticoagulants (NOACs) like Xarelto, are not affected by medications or food and drink, like other anticoagulation medicines such as warfarin, so you do not need to be monitored with regular blood tests. If you have had trouble getting your INR level just right, your HCP may suggest one of these medicines as an alternative to warfarin.

## *Can I take other medications with Xarelto?*

Tell your doctor if you are also taking other medications, even medicines obtained without a prescription (e.g. herbal remedies, vitamins, over-the-counter medicines).

## *Do I need to avoid certain types of food when using Xarelto?*

No. Xarelto must be taken with food and has no known food interactions.

## *Can I drink alcohol whilst taking Xarelto?*

Xarelto does not interact with alcohol. However, you should always drink in moderation and stay within the recommended guidelines.

## *Can I take Xarelto if I am intolerant to some sugars?*

Xarelto contains lactose and you should speak to your doctor if you have a known intolerance to some sugars before taking it.

## *Can I drive or operate machinery whilst taking Xarelto?*

Xarelto may cause fainting or dizziness. If you experience these symptoms you should not drive or use machinery.

## *Can I take Xarelto if I am pregnant or breastfeeding?*

It is important that you discuss this with your doctor as you must not take Xarelto if you are pregnant or breastfeeding. If there is a chance that you could become pregnant, it is essential that you use a reliable contraceptive while you are taking Xarelto. If you become pregnant while you are using Xarelto, inform your doctor immediately, who will discuss your treatment options moving forwards.

## *When should I not take Xarelto?*

You must not take Xarelto:

- if you are allergic (hypersensitive) to Xarelto or any of the other ingredients of Xarelto
- if you are bleeding excessively
- if you have a liver disease which leads to an increased risk of bleeding.
- if you are pregnant or breastfeeding.

Speak to your doctor if any of these apply to you.

## *How is Xarelto stored?*

Xarelto does not have any special storage conditions, however, keep it out of the reach and sight of children and do not use Xarelto after the expiry date (which is provided on the pack).



*If you still have questions surrounding the use of Xarelto please ask your doctor who will be able to answer these and provide you with more information as appropriate.*



## HOW TO USE YOUR XARELTO PATIENT ALERT CARD

In the unlikely event of an emergency, a doctor treating you will need to be made aware of the existing medications you are on so that you can be cared for appropriately. The attached alert card has been designed to make the doctor aware that you are receiving treatment with Xarelto. Please carry this with you at all times.

In addition, please show your card in advance of any dental treatment/operations to ensure you are treated appropriately.

## USEFUL SOURCES OF INFORMATION

To find out more about managing your AF please visit the following independent websites and organisations:

### **AntiCoagulation Europe (ACE)**

Tel 020 8289 6875  
Email [admin@anticoagulationeurope.org](mailto:admin@anticoagulationeurope.org)  
Website [www.anticoagulationeurope.org](http://www.anticoagulationeurope.org)

### **Arrhythmia Alliance (AA)**

Tel 01789 867 501  
Email [info@heartrhythmcharity.org.uk](mailto:info@heartrhythmcharity.org.uk)  
Website [www.heartrhythmcharity.org.uk](http://www.heartrhythmcharity.org.uk)

### **Atrial Fibrillation Association (AFA)**

Tel 01789 451837  
Email [info@atrial-fibrillation.org.uk](mailto:info@atrial-fibrillation.org.uk)  
Website [www.atrialfibrillation.org.uk](http://www.atrialfibrillation.org.uk)

### **British Heart Foundation (BHF)**

Tel 0300 330 3322  
Website [www.bhf.org.uk](http://www.bhf.org.uk)

### **care AF**

Website [www.careaf.org](http://www.careaf.org)

### **The British Cardiac Patients Association (BCPA)**

Tel 01223 846845  
Email [admin@BCPA.co.uk](mailto:admin@BCPA.co.uk)  
Website [www.bcpa.co.uk](http://www.bcpa.co.uk)

### **The Stroke Association**

Tel 0303 3033 100  
Email [info@stroke.org.uk](mailto:info@stroke.org.uk)  
Website [www.stroke.org.uk](http://www.stroke.org.uk)





Developed as a service to patients  
by Bayer

Date of preparation: May 2016  
L.GB.MKT.02.2016.14916