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Apixaban

This factsheet introduces the anticoagulant apixaban to patients and carers, summarises how it works, and explains the advantages and side effects of this medication.

AF and stroke risk

People who have atrial fibrillation (AF) are at higher risk of clots forming in the heart. If these clots travel through the bloodstream to the brain then this may cause an AF-related stroke.

AF-related strokes are often more serious than other strokes. This is because the large clots which form in the heart can cause more damage resulting in more disability.

To reduce the risk of AF-related stroke an anticoagulant is often prescribed. An anticoagulant lengthens the time a clot takes to form by just enough to address any risk of stroke.

Until recently warfarin was the most commonly prescribed anticoagulant and is a very effective medication, dramatically reducing the risk of AF related stroke. Warfarin requires regular monitoring as its effectiveness can vary due to lifestyle, dietary intake, general health and other prescribed medications. Monitoring involves a blood test to check international normalised ratio (INR) levels. The result determines the dose of warfarin.

In recent years further anticoagulants have been developed. These are Direct Oral Anticoagulants (DOACs), and include dabigatran, rivaroxaban, apixaban and edoxaban. Unlike warfarin, they do not require blood tests as they are unaffected by dietary intake, lifestyle or general health. DOACs also interact less with other medications.

The DOACs are as effective as warfarin in preventing an AF-related stroke.

How it works

In February 2013, apixaban was approved by The National Institute for Health and Care Excellence (NICE) for use within the UK. It is prescribed for reducing AF-related stroke risk in people with AF that is not caused by a heart valve problem. It is only recommended if you have AF and risk factors for AF-related stroke, e.g. you have had a stroke or TIA in the past, you are 75 years or older, have hypertension, have diabetes etc.

The clotting of the blood is a complex process as blood should clot rapidly when required, but also remain fluid at other times. The process is often referred to as the 'clotting cascade' by clinicians. This term is used to explain how the stimulation to form a clot triggers a series of steps before producing the blood enzyme thrombin. The enzyme thrombin changes the soluble protein fibrinogen to the insoluble protein fibrin. Clots are made of fibrin.

Apixaban is a medication that has a direct effect on the enzyme called 'Ten A', often written 'Xa'. This is part of the clotting cascade that leads to the soluble 'fibrinogen' being converted to the fibrous 'fibrin' then causes clots (thrombus). This controlled blocking of Xa stops the blood clotting as quickly so helps to prevent the formation of clots in the heart that cause strokes.

Dose

The recommended dose of apixaban is 5mg twice daily. If you are over 80, have low body weight or impaired kidney function, you may be offered a lower dose of 2.5mg twice daily.

You should inform your doctor and dentist that you take apixaban before having any operation or procedure, or before changing or starting other medications including herbal remedies.

Affiliated to Arrhythmia Alliance

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What should I do if I miss a dose?

Apixaban is rapidly metabolised by the body, requiring a twice daily dose. If a tablet is missed or overlooked then it should be taken as soon as possible after the mistake is noticed, unless it is almost time for your next dose. Please check the patient leaflet which comes with your medication for further details. Double or extra doses of apixaban should not be taken.

Advantages

In clinical trials, apixaban was shown to be at least three times more effective than aspirin in preventing AF-related stroke. There are no known lifestyle issues like those that apply to warfarin, and apixaban does not involve frequent blood monitoring.

There are few identified interactions between apixaban and other medications.

Trials have suggested that there may be fewer bleeds in the brain (intracranial haemorrhages) and fewer fatal bleeds when compared with warfarin.

Advantages

Like all medicines, apixaban can cause side effects, although not everyone gets them. The most common side effect is bleeding more easily than normal, such as having nosebleeds, heavier periods, bleeding gums and bruising. Very rarely, apixaban can lead to bleeding in the brain.

Other common side effects include:

- tiredness and lack of energy, shortness of breath, noticeable heartbeats (heart palpitations) and pale skin – these can be signs of anaemia
- feeling dizzy or lightheaded
- a mild rash
- feeling sick (nausea)

Your doctor should discuss all these side effects with you before you start treatment.

There are situations, such as after a heart attack or angioplasty (where the artery is opened using a balloon) when the clinician may advise use of aspirin (or an aspirin-like medication) with apixaban. This is because people need the aspirin to reduce the risk of further heart attack, and the anticoagulant to reduce the risk of AF-related stroke.

Apixaban's anticoagulation effect can be reversed if necessary in an emergency. Andexanet alfa (Ondexxya) aims to reverse the effects of apixaban in cases of uncontrolled or lifethreatening bleeding in the skull (intracranial haemorrhage – ICH).

What to do if you notice bleeding

Small bleeds or minor bruising are to be expected whilst on anticoagulants. If these are concerning to you then you should discuss them with your doctor or anticoagulation nurse.

You should seek medical assistance urgently if you experience any of the following:

- Nosebleeds that last for more than ten minutes
- Blood in your sputum or vomit
- Blood in your urine or faeces
- Passing black coloured faeces
- Severe or spontaneous bruising
- Unusual headaches
- Skin that is cool, moist or looks pale, ashen or bluish

For further information on anticoagulants, please see AF Association's Preventing AF-related stroke: anticoagulation booklet.

To view our patient resources, scan the QR code:

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