



WOMENHEART



FOUNDATION FOR
Women & Girls
with Blood Disorders

NATF's Women's Health Education & Support Group

Managing Heavy Bleeding on Blood Thinners:

What You Should Know

- March 26, 2024 -

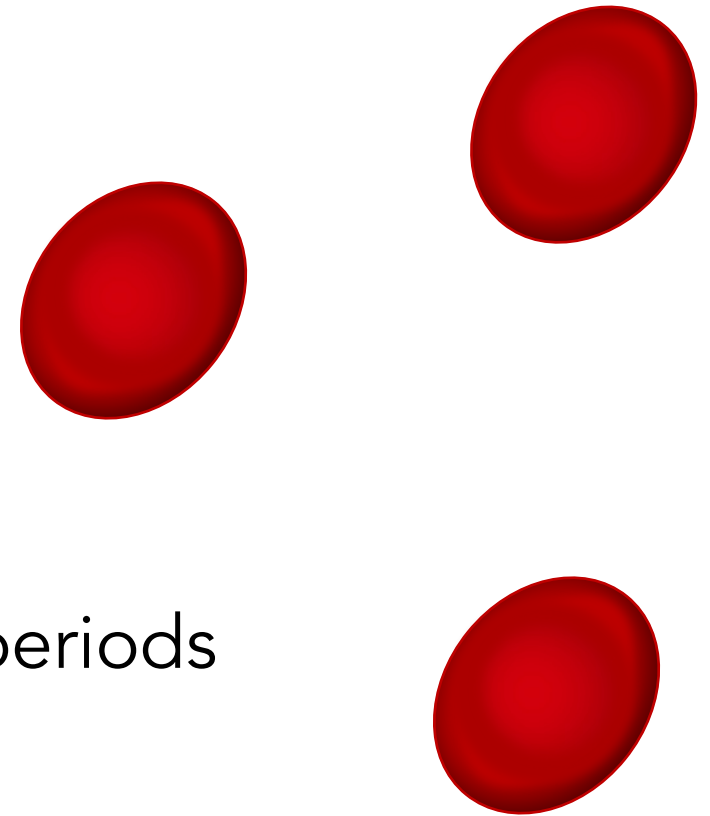
Important Notes

- This deck was created for presentation to NATF's 3/26/24 Women's Health Group, hosted by NATF, FWGBD, and Women Heart. It is an overview of topics covered and is **not** a comprehensive stand-alone resource.
- This slide deck is meant for *general* education purposes only.
- **Always speak to your care team for personalized advice or information.**
- Visit thrombosis.org/support to see all upcoming NATF groups.



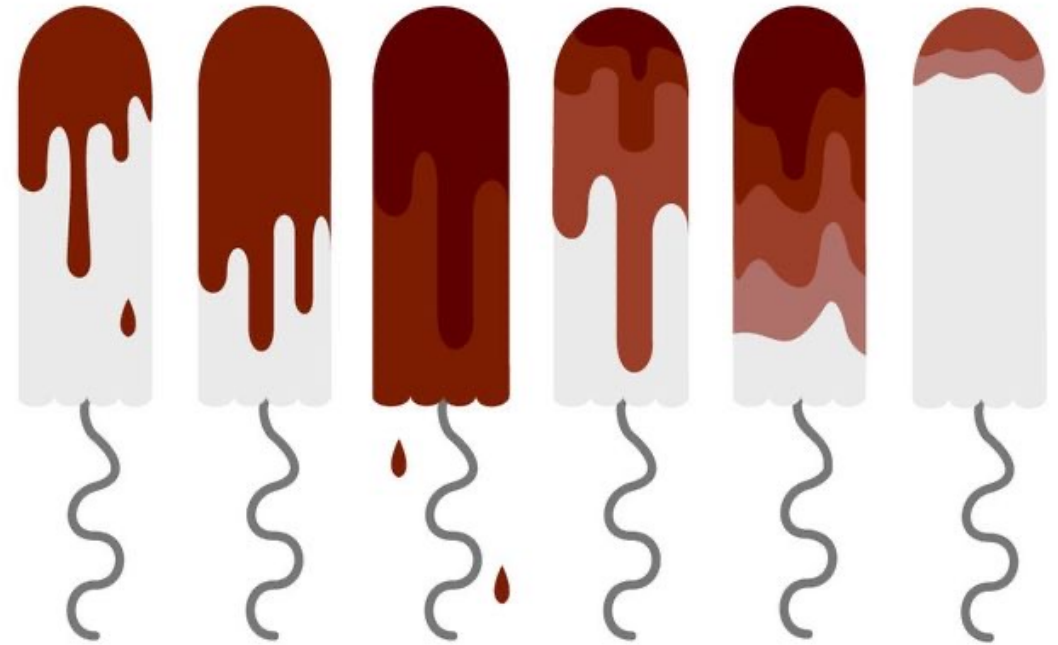
Our agenda

- Defining heavy period bleeding
- Reasons to be on blood thinners
- Impacts of blood thinners on bleeding
- Consequences of heavy periods
- Lab monitoring for blood thinners & heavy periods
- Strategies for managing heavy periods
- What should I ask my doctor?



What is a heavy period?

- Menses = period
- Heavy is ANY of:
 - >7 days of bleeding
 - Pad/tampon lasts <2 hours
 - Passing clots > a quarter
- Also consider:
 - Gushing sensation
 - Bleeding through



Blood thinner uses



Treatment Dose

- Blood clots (venous thromboembolism)
 - Pulmonary embolism (PE)
 - Deep vein thrombosis (DVT)
- Abnormal heart rhythms
 - Atrial fibrillation
- Mechanical heart valves

Prevention Dose

- Protection from blood clots
 - Prior history of blood clots
 - Switch to after a treatment course
 - Intermittent use with risks
 - e.g. pregnancy, long flight
 - Extra risk factors for blood clots
 - e.g. strong family history
 - Higher risk procedures
 - e.g. joint replacement surgery



Blood thinners & periods

- 70% of menstruating patients on blood thinners have heavy or abnormal bleeding
- Not all medications are the same
- More period bleeding
 - Rivaroxaban aka Xarelto
 - Edoxaban aka Savaysa or Lixiana
- Less period bleeding
 - Warfarin aka Coumadin
 - Enoxaparin aka Lovenox
 - Apixaban aka Eliquis



Consequences of heavy periods

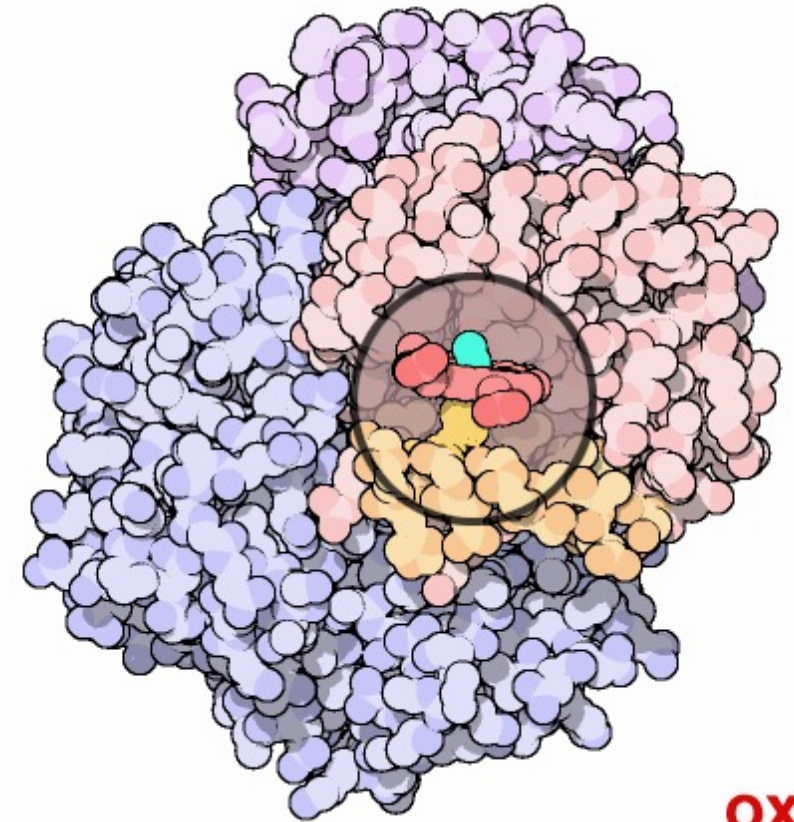
- Missed school
- Missed work
- Avoided socialization
- Anxiety about
 - Bathroom access
 - Bleeding through
- Iron deficiency +/- anemia



Iron deficiency

- Anemia symptoms
 - Fatigue
 - Shortness of breath
 - Decreased exercise tolerance
- Non-anemic iron deficiency symptoms
 - Fatigue
 - Hair loss
 - Pica = craving for ice or clay
 - Restless leg syndrome
 - Altitude sickness

Hemoglobin



oxy



Lab monitoring on blood thinners

- Every 6-12 months:
 - Complete blood count (CBC)
 - Checking for anemia
 - Checking platelets are okay
 - Basic metabolic panel (BMP)
 - Checking kidney function
- With heavy periods
 - Add ferritin & iron checks
- With warfarin: INR checks



So, what do I do? Managing heavy periods

- Adjust blood thinners IF SAFE
 - Switch to medication with less bleeding
 - Drop dose to prevention level
 - Hold or reduce dose of medication during start of period
- Contraception without clot risk
- Address iron deficiency
 - Pills vs. IV
- Find the right emotional support



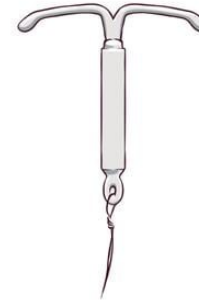
Contraception & clot risk

No extra risk

- Copper intrauterine device (IUD)
 - May cause bleeding
- Most progesterone-based methods
 - Levonorgestrel IUD
 - Progestin only pills
 - Etonogestrel implant
 - aka nexplanon

Increased blood clot risk

- Estrogen containing contraception
- Medroxyprogesterone shot
 - aka Depo-Provera



Things to share with your doctors

About periods

- Cycles regular or not
- # days bleeding
- Frequency of changing pad/tampon
- Any clots bigger than a quarter

How this affects you

- Symptoms of iron deficiency
- Ability to tolerate iron pills (if asked to take)
- Pregnancy or contraceptive needs



Things to ask your doctors

Hematology/Cardiology

- Prevention vs. treatment dosing
- Safety/appropriateness of
 - Less intense blood thinners during periods
 - Switch to a lower bleeding rate medication
- Iron deficiency checked
- Role for iron intravenously *if pills not tolerable or sufficient*

Gynecology/Primary Care

- Menstrual control options
 - IUD
 - Progesterone only pills
 - Progesterone implants
- If periods were heavy even before blood thinners: evaluation for other contributors



Things NOT to do without a doctor

- Stop or pause blood thinner
- Take aspirin or NSAIDs
- Start supplements
 - Some supplements have interactions with blood thinners and can meaningfully increase bleeding risk



References

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 - Image Credit: Arielle Langer
- What is a heavy period Slide: tampons
 - Image Credit: Clare Austen-Smith: <https://www.womenshealthmag.com/health/a19994586/period-blood/>
- Blood thinner uses slide: pills
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- Blood thinners & periods slides: abdominal pain
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- Consequences of heavy periods slide: uterus pain
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- Iron deficiency slide: hemoglobin
 - Image Credit: IHP 1 faculty
- Lab monitoring on blood thinners slide: vials of blood
 - Image Credit: Tom Mallinson: <https://en.wikipedia.org/wiki/Vacutainer>
- So, what do I do... slide: green medication pills
 - Image by juicy_fish on Freepik: <https://www.istockphoto.com/photo/medicine-green-pills-poured-from-a-bottle-on-yellow-background-with-copy-space-drug-gm1090030122-292418034>
- Contraception & clot risk slide: IUD & contraception pills
 - <https://www.plannedparenthood.org/learn/birth-control/iud> and <https://my.clevelandclinic.org/health/treatments/3977-birth-control-the-pill>
- Things to share with your doctors slide: information symbol
 - https://commons.wikimedia.org/w/index.php?title=File:Information_icon4_yellow.svg&oldid=675206803
- Things NOT to do... slide: stop sign
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