

Warfarin and Diet

Many people with Atrial Fibrillation may find that Warfarin therapy is recommended to thin the blood and reduce their risk of stroke.

Warfarin is a very effective medication however it does require regular monitoring to assess how thin it makes the blood. It works by interfering with how the liver uses the Vitamin K taken in our diet.

Due to this action its effect is affected by the amount of Vitamin K in the diet. If the diet is reasonably consistent then the amount of Vitamin K in your diet will be matched by the Warfarin dose.

If your diet contains foods rich in Vitamin K, there is no need to change your diet or restrict these foods from normal levels of consumption.

In more detail foods rich in Vitamin K include:

- Asparagus
- Green Beans
- Blackberries
- Blueberries
- Broccoli
- Brussel sprouts
- Cabbage
- Chicory
- Collard greens
- Cranberry juice
- Kale
- Kiwi fruit
- Lettuce
- Mungo beans
- Mustard greens
- Peas
- Pine nuts
- Raisins
- Sugar snap peas
- Soybeans
- Spinich
- Swiss chard
- Watercress

If you wish to make a more sustained change to your diet, such as eating green leafy vegetables due to their rich calcium content, you should discuss this with your doctor or your anticoagulation clinic as they may wish to monitor your blood test a little more frequently to ensure the Warfarin continues to work effectively.

If you change your diet to contain foods that are richer in Vitamin K then you will find you require more Warfarin. If the diet changes to contain more foods that are low in Vitamin K then your Warfarin dose may need to be reduced.

A simple rule is that leafy green vegetables tend to be rich in Vitamin K and root vegetables, fruits and cereals tend to be low in Vitamin K.

In more detail foods low in Vitamin K include:

- Apples
- Banana
- Beef
- All cereals (including flour etc)
- Cherries
- Chicken
- Cranberries
- Fish
- Lamb
- Lemons
- Melon
- Oranges
- Peach
- Pork
- Shell fish
- Strawberries
- Tofu

Within our normal diet other factors that can interact with Warfarin include:

Alcohol: This affects the way that the body, particularly the liver functions. Taken in a sensible manner and in moderation it is not totally contraindicated. However periods of marked excess must be avoided.

Natural Health Food Products: These are popular additions to the diet and may potentially affect Warfarin therapy or may interact in the natural clotting of the blood. The following is not an extensive list however, any addition of this style of product to the diet should be discussed with your doctor or anticoagulation clinic:

- American ginseng
- Asian ginseng
- Chinese angelica
- Chinese ginseng
- Chinese wolfberry
- Chondroitin plus glucosamine
- Coenzyme 010
- Devil's claw
- Dong quai
- Essence of tortoise shell
- Feverfew
- Fenugreek together with boldo
- Fish oil supplements that contain eicosapentaenoic acid (EPA) and docosahexaenoic acid (DHA)
- Ginkgo biloba
- Ginseng
- Green tea
- Horse chestnut
- Japanese ginseng

- Korean ginseng
- Lycium barbarum
- Methyl salicylate (used on the skin)
- Papaya extract
- St. John's Wort
- Vitamin A
- Vitamin K
- Wintergreen (used on the skin)

Although these lists look restrictive and extensive the key is to eat a sensible diet. Take the Warfarin therapy at approximately the same time each day. If you wish to make major changes to your diet or commence a 'health supplement' discuss this with your doctor or the clinic monitoring your Warfarin therapy. In general they will not restrict your choices but may wish to temporarily increase the level of monitoring for a period as you make changes. Once your blood levels are seen to be stable once more then you will return to your normal monitoring intervals.

This list is not intended to be comprehensive, but as a guide to individuals.

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