

WARFARIN & COUMADIN THERAPY: Vitamin K in your diet

Your doctor has prescribed Warfarin or Coumadin to help prevent harmful blood clots from forming or moving. These medications are sometimes called “blood thinners”.

If treatment is to be successful you must take your medication at the same time each day and have your INR checked as often as your doctor recommends.

- A low INR means you have increased risk of clotting
- A high INR means you have an increased risk of bleeding
- Warfarin increases INR, Vitamin K decreases it
- Most doctors aim to keep INR around 2-3

You should also keep your daily routine as consistent as possible.

What happens if I change part of my daily routine?

Changes in your daily routine can affect the action of Warfarin (Coumadin) and it may be necessary to increase or decrease your dosage.

The changes you must always tell your doctor about are:

- Changing, starting, or stopping other medications
- Changes in alcohol consumption
- Changes in exercise routine
- Changes in diet

Why must I be concerned about other medications?

Many other drugs can influence the action of Warfarin (Coumadin). Talk to your doctor before you take or stop taking, or even change the amount you take, of any of the following:

- All prescription drugs
- Non-prescription drugs such as aspirin or other painkillers, cold and cough medicines, antacids or laxatives

Why should I report changes in alcohol consumption?

Large amounts of alcohol or ‘binge’ drinking can increase your risk of bleeding. Eliminate alcohol if you can, or limit yourself to 1 or 2 drinks in a day.

Why should I report changes in exercise routine?

Exercise can affect how the Warfarin (Coumadin) works so it is important to be consistent with your exercise routine. You should inform your doctor of any changes.

Why is my diet important?

When doctors prescribe Warfarin (Coumadin), they are trying to balance it with how much vitamin K you eat. It is important to keep your intake of vitamin K consistent from day to day.

- Eat no more than 1 serving of foods **High** in vitamin K—see list
- Eat no more than 3 servings of **Medium** vitamin K foods—see list
- Foods **Low** in vitamin K can be eaten as usual—see list
- Limit cranberry juice to 250ml daily (one small glass) as large quantities can raise INR. Talk to your doctor about grapefruit and grapefruit juice
- For some people, green tea, black tea and camomile tea can affect INR. Talk to your doctor about any changes you make
- Talk to your doctor before taking multivitamins containing vitamin K or large amounts of vitamins A, E or C
- Be cautious using diet products such as Ensure®
- Many natural supplements affect INR levels so it is best to avoid them unless your doctor advises otherwise. These include aloe vera, bilberry, CoQ10, dong quai, garlic, ginger, ginkgo, ginseng, goji, horse chestnut, licorice, pau d'arco, red clover, St. John's wort, turmeric, willow bark, and wheat grass

Any questions? Please contact the National Nutrition Centre or the Community Nutrition Officer at your nearest polyclinic

Vitamin K content of some common foods

FOOD	SERVING	µg VIT K	RANK
Kale, cooked	½ cup	531	High
Spinach, cooked	½ cup	444	High
Brussels sprouts	½ cup	109	High
Broccoli, cooked	½ cup	110	High
Cabbage, green	½ cup	81	High
Cabbage, red	½ cup	36	Medium
Broccoli, raw	½ cup	45	Medium
Okra, cooked	½ cup	32	Medium
Chinese cabbage, cooked	½ cup	29	Medium
Coleslaw	½ cup	28	Medium
Mixed veg (canned)	½ cup	15	Low
Lettuce, local	1 leaf	10	Low
Lettuce, iceberg	½ cup	8	Low
Carrots, cooked	½ cup	10	Low
Beans, green	½ cup	10	Low
Tomato, raw	½ cup	7	Low
Cauliflower, cooked	½ cup	4	Low
Cucumber, peeled	½ cup	4	Low
Pumpkin, cooked	½ cup	1	Low
Kiwi	1 medium	28	Medium

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Nutrition Series



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National Nutrition Centre

Ministry of Health

Tel: (246) 536 3800

Email: nutrition.centre@barbados.gov.bb

<http://nutritioncentre.health.gov.bb>

Community Nutrition Officer _____
Telephone _____