

# Medicines Optimisation Briefing – Atrial Fibrillation (AF)

The Royal Pharmaceutical Society's model of medicines optimisation describes four guiding principles (in the boxes below) to achieve three key outcomes: **a patient-centred approach, aligned measurement and monitoring of medicines optimisation** and most importantly **improved patient outcomes**.

## Patient experience

*I've been told I have AF but I don't understand what this is, what all these medicines are for and how to fit them into my day? I feel worse now I am taking them and I am worried about bleeding; how long do I need to take them for and will I ever get better? My father died of a stroke, will these stop me from having one?*

### Steps you can take:

- Ask me to share with you what I know about my medicines, my concerns and what else I would like to know.
- Advise me that my medicines will reduce the symptoms of my irregular heart rhythm and my risk of having a stroke by preventing blood clots.
- Reassure me about any side effects I am experiencing and that these can be minimised with ongoing monitoring and by taking my medicines regularly.

## Safe and effective

*Atrial fibrillation is often symptomless but patients need to understand what symptoms they can self-manage and when they need to contact a health professional. Patients need reassurance that their medicine is working and guidance on how to manage side effects if they occur.*

### Steps you can take:

- Ask patients if they are monitoring their own pulse and how they do this.
- Provide information about the risk of dizziness with some rate-controlling drugs and how to manage this to reduce the risk of falls, for example, getting up slowly and keeping hydrated.
- Reassure patients about the difference between 'minor' and 'major' bleeding and help them to identify when they should seek help.
- Ensure that patients have their anticoagulant alert card with them at all times and know the importance of showing it to all health professionals and to check before they take any OTC medicines or herbal remedies.

## Evidence - is the medicine appropriate?

*The benefits versus risk of treatment for stroke can sometimes be confusing for patients; be prepared to explain the risk of stroke versus bleeding to patients in ways they can understand to help them to be a true partner in the decision making process.*

### Steps you can take:

- Ask patients to tell you what they know about their own risk of having a stroke and what this means for them.
- Use patient decision aids to support what patients already know about the benefits and risks of their medicines.
- Be aware of the national and local guidance for AF and keep your knowledge up to date as guidance changes.
- Discuss with prescribers the inappropriate use of aspirin in people with AF.

## MO as part of routine practice

*Patients with AF regularly pick their medicines up from their local pharmacy and you have an important role in supporting them. Are you confident in the use of all anticoagulants and rate and rhythm control medicines in AF? Are you aware of the monitoring that your AF patients should be receiving and where to refer them if they need support from another health professional?*

### Steps you can take:

- Ask patients about their experience of taking their medicines and check they know what to do if they miss a dose.
- Ask patients if they are being monitored regularly and use every opportunity to check this is being done; work with local health professionals to ensure you give consistent messages to patients.
- If you work in hospital pharmacy refer patients with AF to their community pharmacy post-discharge for support with their new or existing medicines.
- Find out about local support groups and services that are available and signpost patients effectively.

## CASE STUDY 1

*Jean White usually collects her prescriptions from your pharmacy. You notice that she has not ordered her rivaroxaban for eight weeks so you mention this during her medicines use review (MUR).*

She says that she knows that it is important to avoid blood clots to reduce her risk of having a stroke but she was worried as her friend had a bleed whilst on them so she decided to stop the tablets until she had spoken to her doctor. You ask Jean what else she knows about her medicines, her experience of taking them and if there is anything else she would like to know. Jean says she doesn't really understand much about the tablets and wasn't given much information and is frightened to take them. You use a patient decision aid to talk about the risk of stroke versus the risk of bleeding and Jean says that she feels more reassured about the rivaroxaban now. You ask Jean if she has an alert card which lets people know she is taking an anticoagulant. Jean is not aware of what an alert card is so you find the one in her packet of rivaroxaban and explain that she should carry this with her all the time. You print off some information from NHS Choices to support the information on the alert card and then discuss the reduced risk of having a stroke if she takes her medicines regularly. You also suggest phoning Jean's GP on her behalf to discuss the situation and to make her an appointment. Finally you encourage Jean to come back and see you next week once she has seen her GP.

## CASE STUDY 2

*One of your patients, Abdul Bahar, asks to speak to you regarding his bisoprolol tablets. He says he has been taking them for about six months for atrial fibrillation but wants to know if he can stop them now as he feels a lot better and is no longer short of breath.*

You start by asking Abdul what he understands about his condition and what information he was given when he started the tablets. He says that he thought it was just a course of tablets that would stop the breathlessness then he could stop them. You explain to Abdul that you expect he will need to take his medicines long term (with his anticoagulant) and reassure him that the reason he now feels better is because they are working. You ask him if there is anything else he would like to talk to you about and Abdul tells you that he has noticed that he has started to feel dizzy when he gets up out of a chair. You advise Abdul that he needs to see his doctor and offer to phone the surgery while he is with you. Abdul's GP asks him to come to the surgery the same day and Abdul returns later with a prescription for a lower dose of bisoprolol. When you are handing over the new tablets to Abdul you encourage him to come back and speak to you in a week's time to let you know how he is getting on and if he has any other questions you can help with. You record the intervention you have made on Abdul's PMR and make a note to ask Abdul if he is aware of the Arrhythmia Alliance website and Know Your Pulse campaign when he next comes into the pharmacy.

## Lifestyle messages

- Encourage patients to stop smoking and lose weight (if overweight or obese)
- Advise patients about healthy eating and the need to keep their diet consistent if there are any food interactions with their medicines
- Encourage patients to stay active but explain about the potential risks associated with sports to those taking anticoagulants
- Advise that alcohol may trigger or worsen AF in some people

## Where's the evidence?

Clinical knowledge summaries  
<http://cks.nice.org.uk>

European Society of Cardiology  
[www.escardio.org](http://www.escardio.org)

Local formularies and experts

NICE  
[www.nice.org.uk/guidance/conditions-and-diseases/cardiovascular-conditions/heart-rhythm-conditions](http://www.nice.org.uk/guidance/conditions-and-diseases/cardiovascular-conditions/heart-rhythm-conditions)

## Signposting patients

Arrhythmia Alliance  
[www.hearhythmalliance.org](http://www.hearhythmalliance.org)

AF Association  
[www.afa.org.uk](http://www.afa.org.uk)

Afib Matters  
[www.afibmatters.org](http://www.afibmatters.org)

British Heart Foundation  
[www.bhf.org.uk](http://www.bhf.org.uk)

Know your pulse campaign  
(Arrhythmia Alliance and AF Association)  
[www.hearhythmalliance.org/aa/uk/know-your-pulse](http://www.hearhythmalliance.org/aa/uk/know-your-pulse)

Local support groups

NHS Choices  
[www.nhs.uk/Conditions/Atrial-fibrillation/Pages/Introduction.aspx](http://www.nhs.uk/Conditions/Atrial-fibrillation/Pages/Introduction.aspx)

Patient.co.uk  
<http://patient.info/health/preventing-stroke-when-you-have-atrial-fibrillation>

Stroke Association  
[www.stroke.org.uk](http://www.stroke.org.uk)

## Where can I learn more about this?

Clinical knowledge summaries <http://cks.nice.org.uk>

Centre For Pharmacy Postgraduate Education [www.cppe.ac.uk](http://www.cppe.ac.uk)

Royal Pharmaceutical Society [www.rpharms.com](http://www.rpharms.com)