

This guideline is for acute warfarin overdose, not anticoagulation. See separate guideline for long-acting anticoagulant rodenticides (super-warfarins)

### Toxicity / Risk Assessment

Risk of haemorrhage ↑significantly with INR > 5

- *Accidental ingestion of < 0.5 mg/kg is usually benign in patients not normally treated with warfarin and does not require further investigation*

- *Risk factors for complications: falls, chronic liver disease, ethanol misuse, use of other drugs that inhibit CYP2C9*

#### Clinical features:

- Patients are usually asymptomatic
- Haemorrhage (from any site) and / or ↑INR
- Warfarin effect is delayed 24-48 hours post ingestion

#### Some rodenticides contain warfarin

Accidental ingestion by a child is generally Benign. If evidence of toxicity present, non-accidental injury should be considered.

### Management

**Decontamination:** 50g activated charcoal (AC) orally within 2 hours of deliberate self-poisoning

#### **Life-threatening haemorrhage/active uncontrolled haemorrhage/haemodynamic instability**

- Resuscitate, Vitamin K (phytomenadione)10mg IV, Prothrombinex-VF® 50 IU/kg, FFP 15mL/kg

#### **Management of ingestion > 0.5 mg/kg without active bleeding**

##### 1. Patients NOT normally treated with warfarin

- Measure INR 12 hours post ingestion, and then 6-12 hourly until at least 48 hours post ingestion

- If INR > 2 at any time, administer 10-20 mg vit K orally (0.25mg/kg paediatric dose)

Disposition – patients may be discharged if INR < 2, no bleeding and at least 12 hours post last dose Vitamin K

##### 2. Patients already treated therapeutically with warfarin

- Measure INR at 6 hours post exposure and then 6-12 hourly and titrate vit K dose to maintain appropriate therapeutic INR OR reverse warfarin effect using vit K and switch to an alternative anticoagulant therapy.

**If high risk indication** - e.g. mechanical valve, consult with haematology service + consider alternative anticoagulation

- Duration of anticoagulation and need for Vit K Rx may be longer in patients on therapeutic warfarin (> 7 days)

NOTE: Oral vit K must be given at least 4 hours after activated charcoal (IV Vit K may be used in the interim if indicated)

#### Disposition

- Accidental ingestion of less than 0.5 mg/kg of warfarin does not require admission or investigation

- Patients with a raised INR, active bleeding or deliberate self-poisoning should be admitted for inpatient Rx