## Patient and family education on the anticoagulant therapy after mechanical aortic valve replacement

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The choice of aortic valve depends on many factors, including the characteristics of the valve itself. A mechanical valve lasts longer than a biological one but requires lifelong anticoagulant therapy. After implantation of a mechanical aortic valve there is a high risk of clot formation, and the drug of choice is warfarin. Warfarin therapy requires strict discipline and control of therapy, which is why patients require a comprehensive approach and education. Education about the use of anticoagulant therapy should be an important part of care for the patient. The nurse plays a major role in the application of anticoagulant therapy after the implantation of a mechanical aortic valve, in terms of patient and family education. Teaching should be adapted to each patient individually, accompanied by written sources and using different teaching methods. Effective education about anticoagulant therapy includes understanding the very purpose and effect of the drug, dosage, international normalized ratio target range, self-monitoring strategies, the importance of regular monitoring with laboratory tests and the possibility of complications<sup>2</sup>. Also, patients should be educated about reducing the risk of bleeding and injury, as well as procedures if bruises, nose/gum bleeding, blood in the urine and/or stool, vomiting of blood, heavy or prolonged menstruation occur. It is recommended that patients point out that they are using blood thinner therapy, furthermore, they should possess an anticoagulation card and always carry it with them. Given that patients require chronic use of anticoagulant therapy after the implantation of a mechanical valve, the approach should be systematic and coordinated not only by nurses, but by all healthcare workers. It is important that patients are educated in the hospital so they can properly carry out their therapy at home and achieve better clinical outcomes for themselves. Education should be continued on an outpatient basis and/or through day hospitals.

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