



## MASSIVE WARFARIN POISONING WITH DELAYED REBOUND TOXICITY DESPITE VITAMIN K<sub>1</sub>

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**Case report:** We report a case of a 50 year old man who ingested an unknown amount of his warfarin, venlafaxine and paracetamol. He presented with an international normalised ratio (INR) of 2.5 which steadily increased over 24h to 7, despite an initial 1mg of vitamin K<sub>1</sub>. He was then treated with 5mg of vitamin K<sub>1</sub> and discharged home once his INR improved to 4.5, 40h post-ingestion. He was also treated with a full course of acetylcysteine for the paracetamol overdose. The following day his INR rebounded to 8.5 and he suffered a spontaneous epistaxis requiring readmission and was treated with low titrated doses of vitamin K<sub>1</sub>.

**Discussion:** We present a case that highlights the problems in treating a large warfarin overdose, the prolonged effect of warfarin and the rebound in the coagulopathy that can occur despite initial vitamin K<sub>1</sub> treatment. The management of intentional warfarin overdose in patients who require anticoagulation is complex. Multiple options exist, but we suggest commencing regular 3-6 hourly low dose (0.5-2mg) vitamin K on admission and continuing for 2 to 4 days.