



## **The Danger of Pradox – A Personal Story**

*by Michael W.*

When Pradox first became available in October 2010 I was about to go on warfarin since my AF had become very frequent. When I read the story in the *Vancouver Sun* about dabigatran being released, I thought “Hey, that’s for me. No need to get regular blood tests for INR that are needed with the rat poison”. So I asked my cardiologist for a prescription. He asked me to spell dabigatran for him (that should have been a warning).

I took dabigatran for two years without any apparent ill-effect. During that period I had 3 pulmonary vein ablations (PVAs) – each one improving my AF to where I can hopefully now say it is fixed. I had my last PVA on 12 September 2012. In early November 2012 I was alone at our cabin on the east side of Manning Park. I went to bed on the night of 2 November feeling just fine. On the morning of 3 November I woke up barely able to get out of bed. Although I had a satellite phone with me it was downstairs and needed to be taken outside the cabin to make calls. There was no way that I could accomplish either of those steps. Luckily, one of our neighbours was coming round that morning to help me with some work on the cabin. He used the satellite phone to call the ambulance service but help was awhile in coming since my neighbour had to go out to the highway to meet the paramedics and then ferry them and their equipment through the river in his truck. Needless to say, ambulances are not designed to drive through rivers.

To cut a long story short, I was suffering from pericardial bleeding and my heart and other vital organs were shutting down. I was evacuated from the cabin by helicopter to Kelowna hospital and then by jet air ambulance to Vancouver General Hospital. It was touch and go but a combination of dialysis and draining my pericardium saved my life. I was very lucky. I subsequently had a conversation with a Lions Gate Hospital specialist who told me that they had recently had three similar cases – two of the patients had died.

The problems with Pradox are: (1) that there is no way of measuring its level in the body, (2) there is no antidote for it (unlike vitamin K for warfarin) (3) bleeding can happen very quickly and without warning (as it did with me). Also, it would appear that Amiodarone exacerbates the effect of Pradox (while also impeding kidney & liver function that gets Pradox out of the system). I happened to be taking Amiodarone at the time (although I have been off it since the incident).

Frankly, Pradox should be taken off the market until an antidote is found for it. So far it has killed over 500 people in the USA and the lawyers are having a field day with lawsuits against the drug manufacturer. The FDA and the Canadian equivalent are bumbling around as usual – undoubtedly succumbing to pressure from Big Pharma. It would not surprise me if the HMOs in the US are supportive of Pradox (since it avoids them paying the cost of monitoring INR levels).

As you can see, I have a pretty dim view of pharmaceutical companies. My experience with the array of antiarrhythmic drugs thrown at me before I had the PVAs confirms that the medical profession has a rather cavalier attitude towards drug side-effects – “Hey, we sure fixed that arrhythmia! Pity the patient died from the side-effects of the drug.....”

I have to close by saying that the BC Health & Emergency Services and hospitals were magnificent. I owe my life to them.

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