



INSTRUCTIONS FOR PATIENTS ON CHRONIC ASPIRIN THERAPY

Some of our patients with heart defects or Kawasaki disease are prescribed low dose, daily aspirin; this is used to stop platelets from clumping together, so blood clots are less likely to form. Below are some general guidelines for patients who are on low dose aspirin.

What are the risks of being on low dose aspirin?

Low dose aspirin is generally well tolerated. Risks include bleeding, especially GI bleeding, and Reye syndrome (see below), but these are very rare. Easy bruising and nosebleeds are a common side effect of aspirin, but are not predictors of major bleeding, so aspirin does not need to be stopped for these reasons.

The risk of bleeding can be decreased by taking aspirin with food, and treating with an acid blocker if the child complains of stomach aches. Signs and symptoms to watch for include pallor, fatigue, and dark or bloody stools.

Can my child take NSAID's while also taking aspirin?

Do not take NSAID's (e.g. ibuprofen, naproxen, Motrin, Advil, Aleve, Naprosyn) while taking aspirin. This is because taking these medications together could increase side effects (e.g. bleeding). Also, taking the drugs together can reverse the effect of aspirin on the platelets. Acetaminophen (Tylenol) can be safely given to treat pain or fever.

What is Reye syndrome?

Reye syndrome is a very rare, but serious, condition that affects the brain and liver. It is unclear whether Reye syndrome can occur in children taking low dose aspirin, so this is a theoretical risk that has not been proven. Reported cases are almost all in children taking *high* doses of aspirin during or after viral illness. Signs and symptoms to watch for include vomiting and confusion, especially in the days following recovery from a viral illness, especially influenza or chickenpox.

The risk of Reye syndrome can be decreased by making sure your child is immunized against influenza and chickenpox (varicella). See below for more information about vaccines and viral illness.

Flu vaccine

Do not give live influenza vaccine while on aspirin, because there is a slightly increased risk of Reye syndrome. ***Inactivated influenza vaccine can, and should, be safely given every year.***

Varicella (chickenpox) vaccine

There have been no reports of Reye syndrome after varicella vaccine while taking low dose aspirin. Therefore, the risk of Reye syndrome in this situation is close to zero. Because of the theoretical risk of Reye syndrome, the FDA recommends that aspirin be avoided for 6 weeks after varicella vaccine is given. Another antiplatelet medication (for example, dipyridamole or



clopidogrel) can be substituted for aspirin during that time. Please inform your pediatrician that your child is taking aspirin, so that this can be discussed prior to giving the vaccine.

What to do if my child develops a viral illness?

Aspirin can be continued if your child develops a common cold (runny nose, mild cough). We worry more about Reye syndrome in children with varicella (chickenpox) or influenza, and the risk seems to be higher if the aspirin dose is higher. Please inform your pediatrician right away if your child develops any symptoms of these illnesses. Although a substitute medication for aspirin can be considered for 2 weeks, this is not required since in children taking *low* dose aspirin, the risk of Reye syndrome is close to zero.