

# Sodium-glucose Co-transporter 2 (SGLT2) Inhibitors – Medication Information

Dear Patient,

We are sending you this letter because you are currently taking one of the following medications:-Dapagliflozin/ Empagliflozin/ Canagliflozin/ Ertugliflozin.

Take this medication according to the instructions from your prescriber. Please make sure you understand how to take the medicine and ask if you have any questions.

This is an effective treatment for a number of conditions; diabetes, heart failure or chronic kidney disease. As with all medications, it can have some side effects. These can include:

- Hypoglycaemia (low blood glucose) This usually only occurs if taken in combination with other diabetes medicines and your prescriber may therefore need to alter the dose.
- Dehydration This medicine increases your urine volume so may cause dehydration. To prevent dehydration, you must drink at least two litres of non-sugary drinks a day, unless directed otherwise.
- Genital infections As this medicine increases the glucose (sugar) in your urine, there is an increased risk of infection, such as genital thrush. Wash your genital area with warm water using non-perfumed soap and avoid wearing tight underwear to reduce the risk of infection.

In rare cases, SGLT2 Inhibitors can cause more serious side effects or complications, including diabetic ketoacidosis (DKA), Fournier's gangrene and lower-limb amputation. Please seek medical advice immediately if you have any of the following:

- · Rapid weight loss
- · Feeling or being sick, or stomach pain
- · Fast and deep breathing
- Sweet or metallic taste in the mouth
- Different odour to your breath, urine or sweat
- Severe pain, tenderness, redness, or swelling in the genital area, accompanied by fever or feeling unwell

If you are taking canagliflozin, or are diabetic, it is important you attend for regular foot checks whilst taking this medication.

If you become unwell and have vomiting, diarrhoea, or fever, you should stop this medication. You can restart when you are better (eating and drinking normally), however if you remain unwell after 48 hours seek medical advice from your GP, Pharmacist or NHS 111.



## Medicines and Dehydration "Medicine Sick Day Advice"

#### Why have I been given this leaflet?

Taking certain medicines when you are dehydrated or very unwell can lead to more serious illness.

### Which illnesses cause dehydration?

Vomiting, diarrhoea, fever, sweats, shaking and insufficient fluid intake lead to dehydration.

#### What should I do with my medicines?

If you develop a dehydrating illness, it is important to regularly drink small amounts of fluid and discuss your condition with a medical professional. It may be recommended to stop taking certain medicines for a short time, and a blood test might be arranged to check your kidney function. If you are only passing small amounts of urine, you should contact your GP surgery or Out of Hours service, as you may need admission to hospital.

When you are well and eating normally, you can restart your medicines. Please seek medical advice if you continue to feel unwell after 48 hours.

Please cut out the alert card below and place in your wallet.

"Medicine Sick Day Advice" Alert Card

Contact a medical professional if you are unwell with any of the following:

Vomiting and diarrhoea (unless very minor), fever, sweats or shaking

If advised, STOP taking the medicines highlighted overleaf.

Restart when you are well, usually after 24-48 hours of eating and drinking normally.

I (......) am on the following medication(s) that put me at risk of acute kidney injury / lactic acidosis / diabetic ketoacidosis (DKA) if I am dehydrated:

"Medicine Sick Day Advice" Alert Card

Contact a medical professional if you are unwell with any of the following:

Vomiting and diarrhoea (unless very minor), fever, sweats or shaking

If advised, STOP taking the medicines highlighted overleaf.

Restart when you are well, usually after 24-48 hours of eating and drinking normally.

Medicines that need advice if you are unwell:

ACE inhibitor eg lisinopril, perindopril, ramipril

ARB eg candesartan, losartan, valsartan

**Diuretic eg** bendroflumethiazide, furosemide, indapamide, spironolactone

**GLP-1 agonist eg** dulaglutide, exenatide, liraglutide, semaglutide, tirzepatide

NSAID eg diclofenac, ibuprofen, naproxen,

Metformin

**SGLT2 inhibitor eg** canagliflozin, dapagliflozin, empagliflozin, ertugliflozin

Sulfonylurea eg gliclazide, glimepiride, glipizide