

Taking an SGLT2 inhibitor

Simple information to help you take your medicine safely

Why we recommend you take this medication

SGLT2 inhibitors are medicines commonly used for diabetes, heart failure and kidney disease. They can help protect your heart and kidneys as well as helping control blood sugar. Most people take them without serious problems.

Which medicines are SGLT2 inhibitors?

Dapagliflozin (Forxiga®) • Empagliflozin (Jardiance®) • Canagliflozin (Invokana®) • Ertugliflozin (Steglatro®)

What might I notice?

You may pass urine more often or feel thirstier. Some people develop thrush, a urine infection or dizziness, particularly when standing up. Speak to your GP or pharmacist if you are concerned.

The most important thing: what to do when you are unwell

SGLT2 inhibitors can increase the risk of dehydration and, rarely, diabetic ketoacidosis (DKA). Temporarily stop your SGLT2 inhibitor if you are significantly unwell, especially if you have:

- vomiting or significant diarrhoea
- a fever or serious infection
- difficulty eating or drinking normally
- significant dehydration

If this happens: STOP your SGLT2 inhibitor temporarily.

Drink plenty of fluid unless you have been specifically told to restrict fluids. Once you are feeling better and have been eating and drinking normally for at least 24 hours, you can usually restart it. Do not take extra tablets to make up for missed doses.

Rarely, SGLT2 inhibitors can cause DKA

DKA is a serious condition caused by a build-up of ketones in the blood. It is rare and can sometimes happen even when blood sugar is not very high.

Seek urgent medical advice if you develop several of the following:

- feeling sick or being sick
- tummy pain
- unusual or severe tiredness
- feeling very thirsty or dehydrated
- breathing more deeply or quickly than usual
- fruity or sweet-smelling breath
- unusual sleepiness or confusion

If these symptoms occur, stop your SGLT2 inhibitor and seek urgent medical advice. Tell the healthcare professional that you take an SGLT2 inhibitor.

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A very rare infection to be aware of

Very rarely, SGLT2 inhibitors have been associated with a serious infection affecting the skin and tissues around the genitals and the area between the genitals and anus. You do not need to routinely check yourself for this. This is extremely uncommon, but early treatment is important.

Seek medical advice promptly if you develop:

- severe or unusual pain around the genitals or between the genitals and anus
- swelling or redness in this area
- especially if you also have a fever or feel generally unwell

When should I ask for advice?

- You are unsure whether to stop your SGLT2 inhibitor while you are unwell.
- You cannot keep fluids down or have repeated vomiting or diarrhoea.
- You develop symptoms of a urine or genital infection.
- You feel very dizzy or dehydrated.
- You develop symptoms that could suggest DKA.
- You develop severe pain, redness or swelling around the genital area.

Remember the 4 key points

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| • Keep hydrated | Drink regularly unless you have been advised to restrict fluids. |
| • Pause when significantly unwell | Especially with vomiting, diarrhoea, fever or difficulty eating and drinking. |
| • Restart when better | Usually after you have been eating and drinking normally for at least 24 hours. |
| • Know the warning signs | Urgent symptoms such as repeated vomiting, tummy pain, unusual tiredness or difficulty breathing need assessment. |

If you are seriously unwell, confused, very drowsy, struggling to breathe or unable to keep fluids down, seek urgent medical help.

If you have questions about your medicine, please speak to your GP, pharmacist or practice team.