



NSW
Therapeutic
Advisory
Group Inc.

Advancing
quality use
of medicines
in NSW

Group Discussion: SGLT2 inhibitor use in hospitalised patients

Date: September 2018

Question:

NSW TAG and TAGNet members were asked to provide information about the approach being taken at their hospital/LHD regarding withholding sodium-glucose co-transporter 2 (SGLT2) inhibitors and for any relevant guidelines that could be shared to NSW TAG.

Background:

There have been reports of patients with diabetes who are taking SGLT2 inhibitors developing euglycaemic diabetic ketoacidosis (DKA) leading to severe acidosis requiring intensive care/ high dependency unit admission during the peri-operative period. NSW Health released [Safety Notice 005/18](#) Peri-operative risk of SGLT2 inhibitor-associated ketoacidosis.

Some clinicians are considering withholding sodium-glucose co-transporter 2 (SGLT2) inhibitors for all patients on admission, rather than the currently recommended perioperative withholding.

Responses:

Seven responses were received from hospitals.

Summary: None of these sites are mandating withholding SGLT2 inhibitors for all patients on admission. HNELHD and Liverpool provided local documents developed to be read in conjunction with the Safety Notice 005/18. Blue Mountains District AM Hospitals are in the process of developing policy within their admission clinic. RNSH are in the process of developing a guideline on perioperative management of medicines which includes advice on SGLT2 inhibitors.

Blue Mountains District AM Hospitals

At present the only policy that is being developed relates to the Admission Clinic. This is being organised by an anaesthetist.

Hunter New England-Northern Sector (HNELHD)

HNELHD is following the recommended perioperative withholding at the moment. Safety Notice 005/18 have been reinforced with a HNE Medication Safety Alert (document provided to NSW TAG). A fact sheet soon to be ratified and provided to NSW TAG. We will be looking at how we approach unplanned surgery.

Liverpool

Our local recommendations are in line with the Safety Notice 005/18 and a memo was sent out alerting all clinical staff of this Safety Notice 005/18 (memo provided to NSW TAG).

Lower Hunter Sector

We do not have any guidelines on management of this at Maitland, Kurri or Cessnock.

Nepean Hospital

We don't have any policies to automatically withhold SGLT2 inhibitors outside the perioperative period.

Northern Beaches Health Service (NBHS)

We don't have any policies to automatically withhold SGLT2 inhibitors.

We have raised awareness at the clinical pharmacy meetings to follow the safety bulletin recommendations.

Royal North Shore Hospital (RNSH)

Our endocrinologists specifically requested that we remove these agents from the formulary, which we have done. However, the Drug Committee has expressed concern that the risks for patients with unplanned admissions have not been addressed by this strategy. (Patients may bring in their own supply & would it be recognised as an SGLT2 inhibitor?). The Anaesthetic Department is currently working on a guideline called "Management of Medications in the Peri-Operative Period". It is still going through the approval process so it can't yet be shared, but advice on withholding doses is given for SGLT2 inhibitors. The guideline lists the drugs by name as well as classification to aid recognition.

Documents are available on request to NSW TAG.

Responses received as at 17th September 2018

Please note that all information and policies are only current at the time the response is sent and individual hospitals should be contacted to ascertain current policies and practices. The responses received are only representative of the hospitals participating in the discussion at the time and do not necessarily indicate a complete picture of current practices. Information sharing occurs on the understanding that due acknowledgement will be given to the original source and that the information will not be quoted or used out of the context of the discussion. Permission should be sought from the original source before any policy, protocol or guideline is used or applied in another setting.