

SGLT2 inhibitor medicines for diabetes | Consumer information leaflet

What are SGLT2 inhibitor medicines?

Sodium-Glucose Co-transporter-2 (SGLT2) inhibitor medicines can be used in the treatment of type 2 diabetes. They work to lower blood sugar (glucose) by acting on the kidneys so more sugar is removed from the body through the urine. These medicines are often combined with other diabetes medicines. They are available as single-ingredient tablets or combination tablets.

Examples of SGLT2 inhibitor medicines are listed below:

Single-ingredient tablets	Combination tablets
Active ingredient name (Brand name)	SGLT2 inhibitor medicines with other diabetes medicines (Brand name)
Dapagliflozin (Forxiga®)	Dapagliflozin + Metformin (Xigduo®) Dapagliflozin + Saxagliptin (Qtern®)
Empagliflozin (Jardiance®)	Empagliflozin + Metformin (Jardiamet®) Empagliflozin + Linagliptin (Glyxambi®)



The information in this leaflet is in addition to a product's <u>Consumer Medicines Information</u>.

What are some of the benefits of taking SGLT2 inhibitor medicines?



- Lowers blood sugar
 - Helps with weight loss
- 🙌 Slows kidney damage
- Better blood pressure
 - Lowers risk of death in people with heart disease

What are some possible side effects of taking SGLT2 inhibitor medicines?

- **!!** Genital or urinary tract infections
- Passing urine more often
- **!** Feeling thirstier than normal
- I Nausea and constipation
- I Low blood pressure and dehydration
- Il Diabetic ketoacidosis (DKA) (see next page)

Tips to prevent side effects

Side effects are usually mild. It is recommended that you:



Discuss how much water/fluid you should have each day with your doctor



Maintain a healthy diabetes diet



See your doctor for treatment if you think you have an infection.





What is diabetic ketoacidosis (DKA)?

- DKA is rare, but serious, and needs urgent medical treatment. If untreated, DKA can lead to death.
- DKA occurs when instead of the body using blood sugar for energy, fat is broken down leading to high acid and ketones in the blood. DKA can occur in diabetes when there is not enough insulin to stop fat breakdown.
- DKA can occur if you are taking SGLT2 inhibitor medicines, especially if normal eating or drinking routines change, for example when you are sick or having surgery. During these times, your body may be under 'stress' and start to use fat for energy.
- DKA can occur when the blood sugar level is normal or high.
- DKA can be prevented (see below).

What are the symptoms of DKA?

- Nausea, vomiting, stomach pain
- Fast and deep breathing
- Fruity or sweet acetone smelling breath
- Flushed cheeks
- Dehydration e.g. dizziness, very thirsty, dry mouth/lips.
- Unusual tiredness or sleepiness



How do you treat DKA? If you have DKA, it is an **EMERGENCY** and needs to be treated in hospital.

If you experience any of the DKA symptoms, you should:

- Call Triple Zero (000) or go immediately to the nearest Emergency Department.
- Tell the doctor that you are taking an SGLT2 inhibitor medicine.

To treat DKA, the hospital will usually give you insulin and replacement fluids intravenously.

How to reduce the chance of DKA?

Ask your doctor (e.g. GP, anaesthetist, surgeon) if you need to temporarily STOP your SGLT2 inhibitor medicine:

- For surgery/procedures requiring one or more days in hospital or procedures requiring bowel preparation, SGLT2 inhibitor medicines are usually stopped for at least 3 days before surgery/procedure - (two days before surgery/procedure plus the day of surgery/procedure) - ask your doctor for details.
- For day-stay procedures not requiring bowel preparation, SGLT2 inhibitor medicines are usually only stopped for the day of the procedure ask your doctor for details.
- If you are unable to eat or drink because of nausea or vomiting (or eating & drinking less than usual).
- If you are sick with an infection or other illness.
- If you are on a very low carbohydrate diet (or are planning to start a diet).

Key points

- O Always tell your doctor or health professional, you are taking an SGLT2 inhibitor medicine.
- O Always check with the doctor when you should restart your SGLT2 inhibitor medicine if you have been asked to pause taking it.
- If you are sick, contact your doctor straight away to let them know and they will give you advice. They will check your blood sugar and blood ketone levels regularly until you are feeling better again.
- If you become sick within 7 days of having surgery or leaving hospital, speak with your doctor.

My SGLT2 inhibitor medicine name is:

The name & number of my \Box Diabetes specialist OR \Box GP is:

For more information

- Speak to your doctor/specialist, pharmacist or nurse.
- Call the Medicines Line: 1300 633 424 from anywhere in Australia. Available Monday to Friday, 9am to 5pm AEST (except NSW public holidays).
- Search for a Consumer Medicines Information leaflet online: <u>https://www.tga.gov.au/consumer-medicines-information-cmi</u>

Doctor/nurse/ pharmacist:	Your SGLT2 inhibitor medicine was stopped on date:// Re-start your SGLT2 inhibitor medicine only if you are feeling well, eating and drinking normally	
Complete prior	OR OR	
to discharge	□ when	

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