

MITIGATE ADVERSE EFFECTS OF SGLT2 INHIBITORS



Adverse Effects

Genital Infections

- Supportive treatment and address modifiable risk factors including optimizing diabetes care and personal hygiene.
- Infections usually mild and resolve with appropriate treatment.

Hypovolemia

- Recommend early clinical review and reduction of diuretic dose if needed. SGLT2i may need to be withheld if hypovolemia is associated with acute illness.
- In case of AKI, consider withholding SGLT2i on a case-by-case basis.

Less Common Adverse Effects

Necrotising Fasciitis / Fournier's Gangrene

Refer for urgent surgical assessment and intervention if clinical features of this are identified, discontinue SGLT2i.

Hypoglycemia

Uncommonly observed but can occur when used with insulin. **Reduce the dose of sulfonylurea or insulin if eGFR < 45 ml/min/1.73m² and HbA1c < 6%.**

Euglycemic Ketoacidosis

Please consider risk factors that may predispose patient (in particular patients with non-recognized type 1 diabetes and those on other anti-diabetic agents) prior to prescription of SGLT2i. Treat with hydration and electrolyte replacement followed by insulin + glucose. Identify precipitating cause. Consider permanent withholding of SGLT2i vs cautious reinitiation. **If euglycemic ketoacidosis occurs, discontinue the SGLT2i, and evaluate and treat promptly according to local guidelines.**

Angioedema and Other Hypersensitivity Reactions

Erythema, rash, pruritus, and angioedema have been reported. **Withhold SGLT2i and monitor until signs and symptoms resolve.** Hypersensitivity reactions such as anaphylaxis or angioedema would be a contraindication to any further future use.

Hyperlipidemia

Small increase in LDL-C and HDL levels can occur with SGLT2i use. **Following SGLT2i initiation, to monitor lipid profile at least annually.**

Peripheral Vascular Disease and Amputation Risk

Monitor for signs of peripheral vascular disease and foot ulcers during SGLT2i use. Avoid initiation in the presence of active foot disease (i.e. infection, ulceration and ischemia). For Canagliflozin - Withhold prescription in those who develop foot complications during treatment - to reinitiate treatment following resolution of foot complication.