Sodium glucose co-transporter-2 (SGLT2) inhibitors – Safety update

- On March 17, 2020, the FDA announced that they approved safety labeling changes for the SGLT2 inhibitors canagliflozin, dapagliflozin, empagliflozin, and ertugliflozin regarding the temporary discontinuation of these medications before scheduled surgery.
    - The safety update was made to the *Warnings and Precautions* section of the SGLT2 inhibitor drug labels.
    - SGLT2 inhibitors lower blood sugar by causing the kidneys to remove sugar from the body through the urine. Their safety and effectiveness have not been established to treat diabetic ketoacidosis or to treat patients with type 1 diabetes.
    - SGLT2 inhibitors are also available as combination products with other diabetes medicines.

- The FDA approved the label change because surgery may put patients at greater risk for developing ketoacidosis, a serious condition in which the body produces high levels of ketones.
    - Symptoms of ketoacidosis include nausea, vomiting, abdominal pain, tiredness, and trouble breathing.

- Canagliflozin, dapagliflozin, and empagliflozin should each be discontinued at least three days before scheduled surgery.

- Ertugliflozin should be discontinued at least four days before scheduled surgery.

- Blood glucose levels should be carefully monitored after discontinuation of the SGLT2 inhibitor and appropriately managed before surgery.

- The SGLT2 inhibitor may be re-started once the patient's oral intake is back to baseline and any other risk factors for ketoacidosis are resolved.