

## **Special Instructions for Patients Receiving SGLT2i Medications**

## When Preparing for Procedures or Surgery Under Sedation

Sodium-glucose cotransporter 2 inhibitors (SGLT2i) are a newer class of oral diabetic medications and are becoming more widely prescribed. In addition to glycemic control, they provide cardiovascular and renal benefits to a patient.

However, SGLT2i medications have also been linked to a rare but serious complication known as **euglycemic diabetic ketoacidosis** (EDKA) when they are not suspended prior to fasting for a procedure. Part of what makes EDKA so dangerous, is that it cannot be detected with a traditional fingerstick glucose test. The patient's blood glucose may remain perfectly normal, while their body is at risk for dehydration, metabolic acidosis, and even coma.

To minimize the risk of developing EDKA while fasting prior to a sedated procedure or surgery, it is critically important to hold these medications for 72 to 96 hours prior to your procedure. The physician and nursing staff will give specific instructions based on which of these medications are taken. Unfortunately, failure to hold SGLT2i medication may result in cancellation of the surgery or procedure. Please see the exception rule at the bottom of this page for patients who inadvertently did not stop their SGLT2i medications.

Please refer to the table below if patients take an SGLT2i medication or a combination SGLT2i medication with metformin. If they are receiving a combination SGLT2i medication with metformin, please contact their prescribing physician for possible temporary monotherapy with metformin. Also, if they have any concerns prior to stopping any medication, please contact the prescribing physician.

| Hold 72 hours prior to procedure       | Hold 96 hours prior to procedure        |
|--|---|
| Invokana (canagliflozin)               | Steglatro (ertugliflozin)               |
| Farxiga (dapagliflozin)                | Steglujan (ertugliflozin & sitagliptin) |
| Jardiance (empagliflozin)              | Segluromet (ertugliflozin & metformin)  |
| Brenzavvy (bexagliflozin)              |   |
| Qtern (dapagliflozin & saxagliptin)    |   |
| Glyxambi (empagliflozin & linagliptin) |   |
| Invokamet (canagliflozin & metformin)  |   |
| Xigduo XR (dapagliflozin & metformin)  |   |
| Synjardy (empagliflozin & metformin)   |   |
| Glyxambi & metformin                   |   |

## EXCEPTIONS to cancellation for inadvertently taking meds at the discretion of anesthesiologist, proceduralist, & surgeon:

Cases in which there is high stress or where a prolonged fasting state is expected (>12 hours) and the patient is having anesthesia, should be cancelled. Exceptions include patients undergoing short low stress procedures or surgeries such as Endoscopies, cystoscopies, cardioversions, TEEs, carpal tunnels, pain management, MRIs (<45minutes), where postprocedural oral intake can occur within a 12 hour fasting window.