

Medicines and Dehydration: Medicine Sick Day Guidelines

Information for patients with type 2 Diabetes

This leaflet is about what actions to take if you develop an illness that causes dehydration. These actions are called ‘medicine sick day guidelines’. It also contains advice as to what action you should take if you think you may be developing COVID-19.

Why is this important?

This leaflet is designed for people with type 2 Diabetes who may be taking any or all of these medicines in the long term.

If you are unsure whether this applies to you please speak to your doctor, nurse or pharmacist. Your doctor, nurse or pharmacist can tick your medicines from this list on the ‘Medicine Sick Day Guidelines’ card if you have one.

- **ACE inhibitors: a medicine for high blood pressure and heart conditions**

If you are dehydrated, these medicines can stop your kidneys working properly.

Examples: medicines with names ending in ‘pril’ such as lisinopril, perindopril, ramipril

- **ARBs: a medicine for high blood pressure and heart conditions**

If you are dehydrated, these medicines can stop your kidneys working properly.

Examples: medicines with names ending in ‘sartan’ such as losartan, candesartan, valsartan

- **Diuretics: sometimes called ‘water pills’ for excess fluid and high blood pressure**

These medicines can make dehydration more likely.

Examples: furosemide, bendroflumethiazide, indapamide and spironolactone

- **Metformin: a medicine for diabetes**

If you continue to take metformin when you are dehydrated, it could cause acid to build up in your body making you more unwell and meaning you may have to be admitted to hospital.

- **NSAIDs: anti-inflammatory pain killer**

If you are dehydrated, these medicines can stop your kidneys working properly.

Examples: ibuprofen, naproxen and diclofenac

- **SGLT2: a medicine for diabetes.**

This medicine may make dehydration worse.

Examples: medicines with names ending in “flozin” such as empagliflozin, Canagliflozin, dapagliflozin.

Other medicines you take may also result in a more serious illness when you are dehydrated. Your health professional will discuss these with you.

Which illnesses cause dehydration?

Dehydration is the loss of fluid from your body. Vomiting, diarrhoea and fever (high temperature, sweats and shaking) can make you dehydrated.

If you are sick once or have diarrhoea once, then you are unlikely to become dehydrated. Having two or more episodes of vomiting or diarrhoea can lead to dehydration: in these cases, you should follow the advice in this leaflet.

What actions should I take?

If you develop a dehydrating illness, you should temporarily stop taking any medicine listed in this leaflet and any other medicine which has been identified by your health professional.

It may be useful to think along these lines: "If I am unwell and cannot eat or drink then I should stop taking these tablets"

It is very important that you **only** restart your medicine once you have recovered from the illness. This should be after you have been able to eat and drink normally for between 24 and 48 hours. When you restart your medicine, take them as normal- **do not take extra for the doses you have missed.**

SGLT2 medicine and COVID -19

If you have type 2 diabetes, you must stop taking your SGLT2 tablets (empagliflozin, dapagliflozin, canagliflozin) if you develop **any** symptoms suggestive of coronavirus (a high temperature, a new continuous cough or a loss in sense of smell or taste). They can be restarted 2 days after your symptoms clear up.

It is important to follow this advice even if you have not developed symptoms of dehydration.

Need more information?

Please contact your pharmacist, doctor or nurse if you have any questions about the Medicine Sick Day Guidelines.

This leaflet is adapted from the original leaflet produced by NHS Highland