

TYPE 2 DIABETES GUIDELINES FOR REDUCING RISK OF DIABETIC KETOACIDOSIS (DKA) WITH SGLT2 INHIBITOR MEDICATIONS

SGLT2 inhibitors are medications that reduce glucose (sugar) levels in your body by increasing the amount of sugar you pass in your urine.

DKA RISK FACTORS

- Dehydration caused by vomiting or diarrhea
- Increased stress levels
- Illness such as the flu or infections
- Prolonged fasting (i.e., for medical procedures or tests)

BE AWARE AND PAY ATTENTION TO SIGNS AND SYMPTOMS OF DKA

Even if your blood glucose is not high, when taking SGLT2 inhibitors you can still get DKA when blood sugars are “normal.” Call your diabetes care team right away if you experience abdominal pain, nausea or vomiting. If you go to the emergency room with these symptoms, make sure to let them know that you’re taking SGLT2 inhibitor medication.

DURING PERIODS OF INCREASED RISK OR WHEN YOU HAVE SYMPTOMS LISTED ABOVE:

- Check for ketones. If they’re small or greater, call your diabetes care team immediately.
- Do NOT take your SGLT2 inhibitor medication that day.
- Eat 30 grams of carbohydrate and if you take insulin, cover with insulin.
- Drink sugar-free clear liquids to stay well hydrated (i.e., water, apple juice, cranberry juice, white grape juice). Drink at least 8 to 12 ounces of fluid every hour until ketones are negative to trace.
- Check with your diabetes care team about when to resume your SGLT2 inhibitor medication.

DON'T TAKE SGLT2 INHIBITORS WHEN AT RISK OF DEHYDRATION

When you’re sick, vomiting, have diarrhea, or can’t drink enough fluids, you should stop taking this medication until the symptoms go away. Don’t take SGLT2 inhibitors when following NPO (nothing by mouth) prior to a medical procedure.

DIABETES CENTER OF EXCELLENCE

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