

# CONTROVERSIES IN THE PREOPERATIVE MANAGEMENT OF SGLT2 INHIBITORS

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## BACKGROUND AND IMPORTANCE

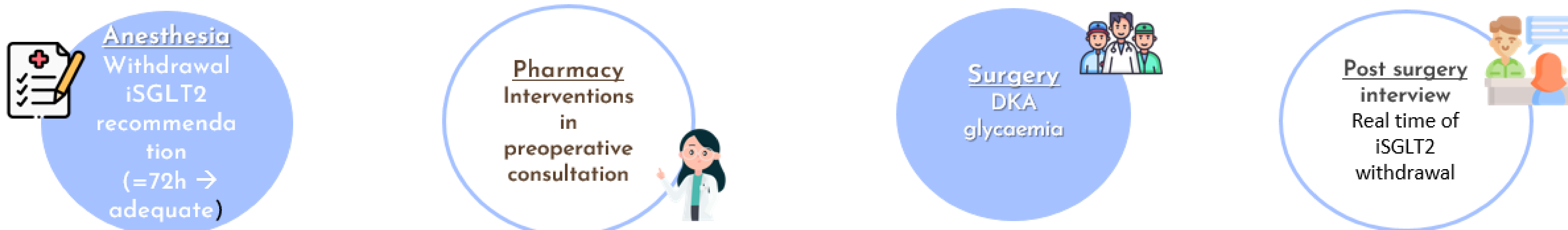
To minimize the risk of perioperative **diabetic ketoacidosis**, the FDA recommends discontinuing sodium-glucose cotransporter type 2 inhibitors at least three days before surgery.

## AIM AND OBJECTIVE

- ✓ to describe glycaemic variations and incidence of diabetic ketoacidosis **in patients** treated with iSGLT2 undergoing surgery according to the **real time of drug discontinuation** by the patient.
- ✓ To analyze adequacy of anaesthesia recommendations and **describe pharmacist interventions in the preoperative management.**

## MATERIALS AND METHODS

Design: A **prospective intervention** study (March-June 2024) was conducted on hospitalized patients undergoing surgery while on iSGLT2 therapy.



## RESULTS

The study included 53 patients, 42 male, 75 (mean) years and a mean BMI 27.6. Dapagliflozin was prescribed in 73.6%.

**30.2%** of patients did not receive adequate recommendation and **20.0%** did not recall anaesthesia recommendations. The **pharmacist intervened in 50% of patients, ensured patients understanding** and insisted on stopping iSGLT2 72 hours before surgery → **88.7% compliance rate.**

30% of patients exhibited preoperative hyperglycaemia. No significance differences were detected in glucose level in the perioperative period. Six patients did not discontinue the medication, two of whom experienced hypoglycaemia. → **No cases of DKA** were recorded, and all patients maintained normal pH levels.

## CONCLUSION AND RELEVANCE

No patients developed DKA, supporting the recommendation of a 72-hour discontinuation period for iSGLT2 before surgery.

Pharmacists are integral in ensuring adherence to preoperative medication protocols, enhancing patient understanding and compliance.

To address controversies, **a pharmacist-led clinical session** was conducted to improve hospital protocol adherence for iSGLT2 preoperative management to Anaesthesia and Pharmacy departments.

