

MEDICAL PHARMACIES NEW DRUGS

Drug Information and News for Health Care Providers

February 2016

JARDIANCE™

(EMPAGLIFLOZIN 10 MG AND 25 MG TABLETS)¹

CAUTION IN THE ELDERLY!

Jardiance™ (empagliflozin) is the third of a class of anti-diabetes drugs known as sodium-glucose cotransporter 2 (SGLT2) inhibitors to be marketed in Canada. SGLT2 inhibitors reduce the extent of reabsorption of glucose in the proximal tubules of the kidney. Because glucose is not reabsorbed, it is allowed to pass out of the body in the urine, which leads to reduction of glucose in the blood.

INDICATION FOR USE AND GOAL(S) OF THERAPY

The goal of anti-diabetes medications such as Jardiance™ is to reach blood glucose control targets without causing adverse effects, including hypoglycemia.

Jardiance™ is indicated for use as monotherapy (in addition to diet and exercise) or combination therapy in adults (≥ 18 years of age) with ONLY type 2 diabetes to improve blood glucose control. Jardiance™ is expected to have reduced efficacy in older residents (≥ 65 years of age) who are more likely to have impaired renal function.

CONTRAINDICATIONS

Jardiance™ is contraindicated in residents with a history of hypersensitivity to empagliflozin or to any of the excipients. Jardiance™ is contraindicated in renally impaired residents with estimated glomerular filtration rate (eGFR) less than 45 mL/min/1.73 m². Caution should be used if Jardiance™ is used in residents 65 years of age and older. Jardiance™ is not recommended in residents with severe hepatic impairment or with mixed insulins.

DOSE & ADMINISTRATION

The recommended dose of Jardiance™ is 10 mg once daily at any time of day with or without food. If Jardiance™ 10 mg once daily is tolerated and the resident requires additional blood glucose control, the dose can be increased to 25 mg once daily. In residents using insulin or an insulin secretagogue (e.g., sulfonylurea), consideration should be given to lowering the dose of these drugs to reduce risk of hypoglycemia.

WHAT TO MONITOR AND REPORT TO THE HEALTHCARE TEAM

Careful monitoring of fluid intake to prevent volume depletion or electrolyte imbalance is recommended when Jardiance™ is used. If volume depletion or dehydration is noted, temporary discontinuation of Jardiance™ should be considered. Jardiance™ should be used with caution in residents taking diuretics (especially loop diuretics such as furosemide).

Blood pressure should be monitored. Patients at risk include those with known cardiovascular disease, residents taking medications to lower blood pressure, elderly residents, residents with low systolic blood pressure, and those with conditions that may lead to volume depletion (e.g., gastrointestinal illness).

Watch for symptoms such as nausea, vomiting, anorexia, abdominal pain, excessive thirst, difficulty breathing, confusion, unusual fatigue, or sleepiness indicating residents should be assessed for ketoacidosis immediately and Jardiance™ discontinuation or temporary interruption should be considered by the healthcare team.

Low-density lipoprotein cholesterol (LDL-C) levels should be monitored, as LDL-C dose-related increases have been seen with Jardiance™ treatment.

Jardiance™ increases the risk of urinary tract infections and the risk for genital mycotic (yeast) infections.

Please refer to Jardiance™ product monograph for more comprehensive information, including warnings and precautions.

Reference:

1. Jardiance™ Product Monograph. e-Therapeutics+ Complete: e-CPS Canadian Pharmacists Association, Ottawa, ON.