



Real world experience with SGLT-2 inhibitors: An audit from a tertiary care hospital in Singapore

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Background and Aims

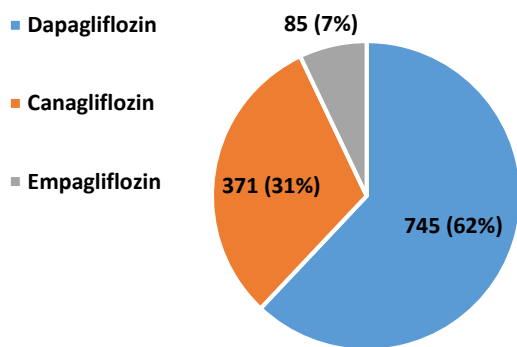
SGLT2i have effects on weight, blood pressure (BP) and HbA1c. Urogenital infections (UI) and ketosis are concerns. An audit of real-world therapeutic and adverse effects of SGLT2i use is presented.

Methods

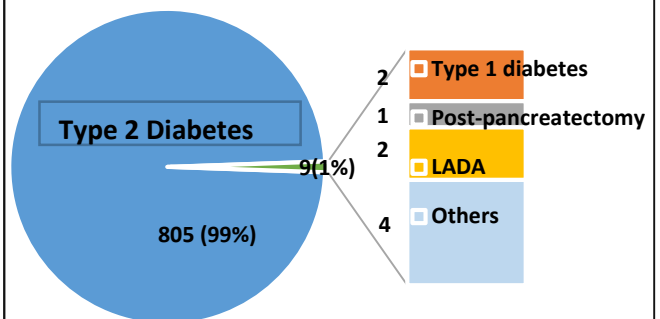
Subjects taking dapagliflozin, canagliflozin or empagliflozin were studied. Weight, BMI, BP, HbA1c were compared 6 months (m) prior to, and 12m after initiation. DKA and UI while on SGLT2i were studied.

Results

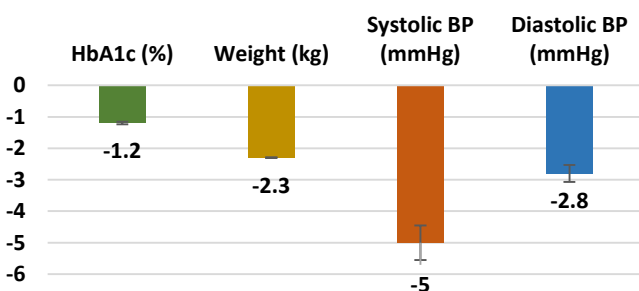
Type of SGLT2i [n=1201, M(58%), F(42%)]



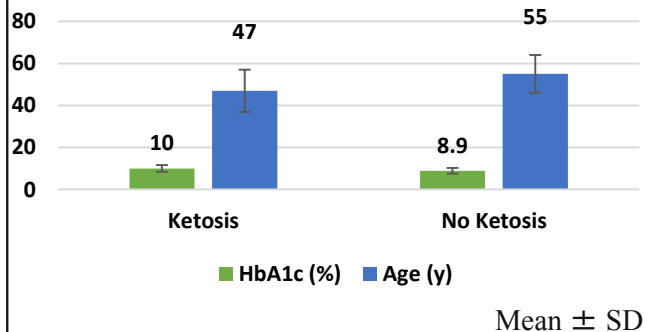
Type of Diabetes (n=814, known diagnosis)



Mean (± SE) decrease in parameters after initiation of SGLT2i



Subjects with ketosis on SGLT2i were younger and had a higher HbA1c, p<0.05



5/1201(0.4%) developed DKA [precipitants: non-adherence to insulin (2), infection(2)] and 13/1201(1.1%) had urogenital infections while on SGLT2i.

Conclusion

The real-world therapeutic and adverse effect profile of SGLT2i use were similar to the data from clinical trials. Most subjects who developed DKA while on SGLT2i had additional precipitating factors.