

Taking Your Medications When You Are Sick

A Guide for Patients with Chronic Kidney Disease (CKD)

Notes:

This pamphlet is for educational purposes only. It is not intended to replace the advice or professional judgment of a health care provider. The information may not apply to all situations. If you have any questions, please ask your health care provider.

Find this pamphlet and all our patient resources here:
<https://library.nshealth.ca/Patients-Guides>

Connect with a registered nurse in Nova Scotia any time:
Call 811 or visit: <https://811.novascotia.ca>

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My Sick Day Plan:

I will stop taking these medications until I am feeling better:

Take _____ of fluids on sick days.

My Sick Day Plan was updated on:

What are your questions?

Please ask a member of your health care team. We are here to help you.

Angiotensin receptor blockers:

- › Candesartan (Atacand[®])
- › Irbesartan (Avapro[®], Avalide[®])
- › Losartan (Cozaar[®])
- › Olmesartan (Olmetec[®])
- › Telmisartan (Micardis[®])
- › Valsartan (Diovan[®])

Nonsteroidal anti-inflammatory drugs (NSAIDs):

- › Acetylsalicylic acid/ASA (Aspirin[®])* does not include low-dose ASA (81 mg)
- › Celecoxib (Celebrex[®])
- › Diclofenac (Voltaren[®])
- › Ibuprofen (Advil[®])
- › Indomethacin (Indocin[®])
- › Ketorolac (Toradol[®])
- › Meloxicam (Mobicox[®])
- › Naproxen (Aleve[®])

SGLT2 inhibitors:

- › Canagliflozin (Invokana[®])
- › Dapagliflozin (Forxiga[®])
- › Empagliflozin (Jardiance[®])

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- There are some medications (see page 3) you should stop taking when you are sick if you are also:
 - › Vomiting (throwing up)
 - › Having diarrhea (loose, watery poop)
 - › Not able to drink enough fluids to stay hydrated
- These medications are important, but they can hurt you if you do not have enough fluid in your body.
 - › You can go back to taking your medications when you are feeling better.
 - › If you are not able to take your medications for more than **3 days**, call your primary health care provider (family doctor or nurse practitioner).
- Make sure you are drinking enough fluids.
 - › Talk with your renal dietitian or nurse to find out what the right amount of fluid is for you.

- If you have diabetes, check your blood sugar level more often.
 - › If you are using insulin, keep taking your basal insulin. Examples of basal insulin are: Lantus® (glargine), Basaglar®, Humulin® N, Novolin®ge NPH, and Levemir®.
 - › If your blood sugar level is too high or too low, call your primary health care provider.
- Make sure you talk with a pharmacist before taking any over-the-counter medications.
 - › Many cough, cold, and natural health care products have ingredients that you should avoid.
 - › Tell the pharmacist that you have kidney disease and are not feeling well.
- If you are taking digoxin or lithium, talk to your primary health care provider. **You need to have a plan for taking these medications when you are sick.**
- If you are not sure about any of your medications, talk to your primary health care provider or pharmacist.

Medications to avoid (SAD2MANS)

Sulfonylureas:

- › Gliclazide (Diamicron® MR)
- › Glimpiride (Amaryl®)
- › Glyburide (Diabeta®)

ACE inhibitors:

- › Cilazapril (Inhibace®)
- › Enalapril (Vasotec®)
- › Fosinopril (Monopril®)
- › Lisinopril (Prinivil®, Zestril®)
- › Perindopril (Coversyl®)
- › Ramipril (Altace®)

Diuretics:

- › Chlorthalidone
- › Furosemide (Lasix®)
- › Hydrochlorothiazide
- › Indapamide
- › Spironolactone (Aldactone®)

Direct renin inhibitors:

- › Aliskiren (Rasilez HCT®)

Metformin (Glucophage®, Glumetza®, Janumet®)