Medicines and Dehydration

"Think Kidneys" – Medicine Sick Day Rules

Patient Information

This leaflet is about what actions to take if you develop an illness that causes dehydration. These actions are called 'medicine sick day rules'.

‘Think Kidneys’ what is the potential problem?

Taking certain medicines when you are dehydrated can put **extra strain on your kidneys** and result in you developing a more serious illness.

Kidneys are vitally important to us, keeping us healthy by filtering our blood and producing urine to get rid of excess water and toxins.

This leaflet lists medicines that should be temporarily stopped during a dehydrating illness

Dehydration is the loss of fluid from your body. Vomiting, diarrhoea and fever from infections or flu like illnesses (high temperature, sweats, shaking) can make you dehydrated, especially if you are drinking very little.

If you are sick once or have diarrhoea once, then you are unlikely to become dehydrated.

If you become suddenly unwell or having two or more episodes of vomiting or diarrhoea it can lead to dehydration: in these cases, you should follow the advice in this leaflet.

Are you under the care of a specialist team e.g. Heart Failure team or Renal Unit?

If yes, please contact them during working hours or your out of hours GP service before changing your treatment

If no, you should temporarily stop taking the medicines listed in this leaflet until your symptoms settle and follow the advice on page 4. If this is more than 48 hours, please check with your GP for advice.

Restart your medication in full once you are recovering and eating and drinking normally for 24-48 hours

IT IS IMPORTANT YOU DO NOT STOP TAKING YOUR MEDICATION IF YOU ARE WELL

ACE inhibitors: a medicine for high blood pressure and heart conditions.

If you are dehydrated, these medicines can stop your kidneys working properly.

Examples: names ending in 'pril' such as lisinopril, perindopril, ramipril, enalapril

ARBs: a medicine for high blood pressure and heart conditions.

If you are dehydrated, these medicines can stop your kidneys working properly.

Examples: names ending in 'sartan' such as losartan, candesartan, valsartan, irbesartan

Diuretics:

sometimes called 'water pills' **for excess fluid and high blood pressure.** These medicines can make dehydration more likely**. Examples:** furosemide, bumetanide, bendroflumethiazide, indapamide, spironolactone

Flozins
A medicine for diabetes

These medicines can make dehydration more likely**. Examples:** Dapgliflozin, Empagliflozin, Canagliflozin

Metformin: a medicine for diabetes.

Dehydration can make it more likely that you will develop a serious side effect called lactic acidosis.

NSAIDs:
anti-inflammatory pain killers.

If you are dehydrated, these medicines can stop your kidneys working properly.

Examples: ibuprofen, naproxen, diclofenac, celecoxib, etorcoxib

What actions should I take if I'm unwell?

If you develop a dehydrating illness, you should temporarily stop taking any medicine listed in this leaflet and any other medicine identified by your health professional**.**

It is very important that you restart your medicine once you have recovered from the illness.

This would normally be after 24 to 48 hours of eating and drinking normally. When you restart your medicine, just take them as normal. Do not take extra for the doses you have missed.

Also:

- Drink plenty of fluids so that you avoid becoming dehydrated until your acute/sudden illness passes. This should be at least 7 cups a day (one cup = 200ml), unless you have other instructions from your doctor.
- If you are vomiting, take small sips of water/fluid frequently until your symptoms have settled.
- Avoid alcoholic drinks

Speak to your GP if you have passed much less urine than you normally pass, or if you are unable to keep fluids down or have diarrhoea or vomiting for longer than 48 hours. The doctor may need to take a blood test to check how well your kidneys are working.

If you have any doubts or concerns please contact your pharmacist, doctor or nurse or NHS 111.

More information can be found at: https://www.thinkkidneys.nhs.uk/aki/

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