SGLT2 Inhibitors for Heart Failure

Information to help you understand your treatment options

This leaflet has been given to you to help explain a treatment that may be offered for heart failure.
It is intended to support discussion with your GP.

What is heart failure?

Heart failure is a condition where the heart is not able to pump blood around the body as effectively as it should. This can lead to symptoms such as breathlessness, tiredness, and swelling of the ankles or legs.

Some people with heart failure feel stable day to day and may not notice many symptoms. Even when symptoms are mild or stable, treatment is still important to protect the heart and reduce the risk of future problems.

What are SGLT2 inhibitors?

SGLT2 inhibitors are a group of medicines that are now used to treat heart failure. Common examples include dapagliflozin and empagliflozin.

These medicines were first used to treat diabetes. However, large studies have shown that they also help people with heart failure, even if they do not have diabetes.

Why might this medicine be offered to me?

Research has shown that SGLT2 inhibitors can reduce the chance of being admitted to hospital with heart failure and can help people live longer. Some people also notice an improvement in symptoms such as breathlessness or fatigue.

Importantly, these benefits apply even if your heart failure feels stable and even if you do not have diabetes. This is why the medicine may be offered as part of your routine heart failure treatment.

Why can my GP prescribe this medicine now?

National heart failure guidelines have recently changed based on new evidence. SGLT2 inhibitors are now recommended for all types of heart failure and are considered safe and effective to start in primary care.

GPs are experienced in prescribing these medicines and in monitoring patients who take them. Your GP can check whether the medicine is suitable for you, arrange any necessary blood tests, and work with heart failure specialists if needed.

Because of these changes, treatment does not need to be delayed while waiting for a hospital appointment.

How is the medicine taken?

SGLT2 inhibitors are taken once a day. The dose does not usually need to be increased over time, and the medicine can be taken alongside other heart failure treatments.

Who should not take this medicine?

SGLT2 inhibitors are not suitable for everyone.

You may not be advised to take an SGLT2 inhibitor if you:

- Have type 1 diabetes
- Have had a serious allergic reaction to this type of medicine in the past
- Have severe kidney disease where this medicine is not recommended
- Are pregnant or breastfeeding
- Have had repeated serious infections related to this type of medication

In some situations, the medicine may need to be delayed or temporarily stopped, for example if you are acutely unwell, dehydrated, or unable to eat or drink normally. Your clinician will explain this if it applies to you.

Why What are the possible side effects?

Most people tolerate this medicine well. Some people may experience mild side effects such as passing urine more often or developing thrush or a genital infection.

Less commonly, people can feel dizzy if they become dehydrated, particularly during illness. Your clinician will explain what to look out for and how to reduce these risks.

SGLT2i Explainer Videos

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When should I seek medical advice?

You should contact your GP or nurse if you:

- Feel unwell or dehydrated
- Develop a painful or unusual genital infection
- Are unsure whether to continue the medicine during an illness

You may be advised to temporarily stop the medicine if you are acutely unwell.

Do I have to decide straight away?

No. Starting this medicine is your choice. You can take time to read this information, discuss it with family, and ask questions at your next appointment.

If you decide not to start the medicine now, your current care will continue and the option can be revisited in the future.