

Sick Day Medication Guidance in Chronic Kidney Disease

Why is sick day medication guidance important?

When people living with chronic kidney disease (CKD) are unwell, e.g. with diarrhoea and vomiting (dehydration), their kidney function can worsen. The kidneys' ability to remove medication from the body may be lower. This can result in more side effects from the medications or the medications may become toxic to the kidneys.

The information below helps people living with CKD protect their kidney function by temporarily stopping some medications when they are unwell with diarrhoea and vomiting.

What medications should be temporarily stopped?

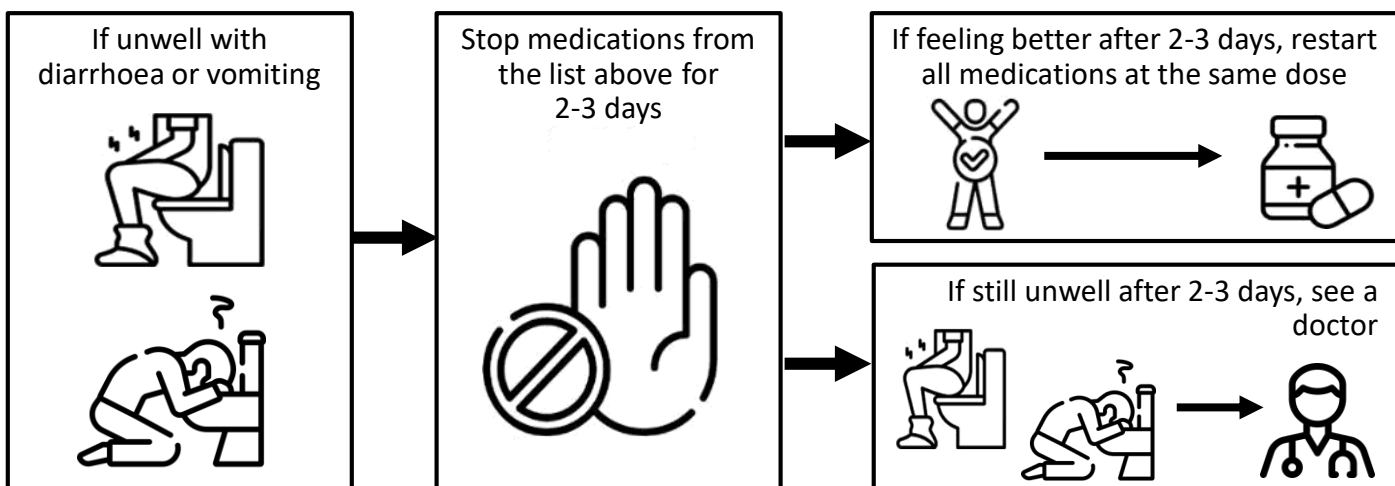
Ask your doctor, pharmacist or nurse if you take any of the medications from the first box below. Then ask them to complete your sick day guidance medication list in the second box below. This should be reviewed every time your medication is changed.

Angiotensin-converting enzyme inhibitor
Angiotensin receptor blockers
Direct renin inhibitors e.g. aliskerin
Diuretics
Non-steroidal anti-inflammatory drugs
SGLT2 inhibitors
Finerenone
Metformin
Sulfonylureas (e.g. gliclazide, glimepiride)

My sick day guidance medication list

Do not stop insulin if you have diabetes. Increase monitoring of your blood glucose.

How to stop medications when unwell



Advice for when you are well

- Never take non-steroidal anti-inflammatory drugs which can damage your kidneys further. These are found in pain and cold remedies e.g. Nurofen, ibuprofen.
- Continue with steroids such as prednisolone or hydrocortisone. Never stop them suddenly.
- Check with your pharmacist before using over the counter medicines and discuss all changes with your GP or clinic.