

Managing your medications prior to surgery

Some regular medications need to be stopped prior to your operation.

Please read the information below about common medications which may need to be stopped before your operation. Please phone our office if you are uncertain if you have to stop any of your medications.

If you are asked to stop any medications before your operation, please ask your doctor before restarting these medications after your operation.

Common medications which are safe to continue

You should continue to take your regular medications for the following conditions:

- Blood pressure medications
- Cholesterol lowering medications
- Medications for reflux and/or stomach ulcers
- Anti-depressants

These tablets can be taken on the morning of surgery with a small sip of water, even though you are fasting.

Blood thinning medications

You can continue to take low dose (100mg daily) aspirin (*Cartia, Astrix, Cardiprin, Cardasa* etc.) prior to your surgery.

If you have heart disease, a cardiac stent, an artificial heart valve, an irregular heart rhythm (atrial fibrillation), have had a stroke or mini-stroke, or have had a blood clot (DVT/PE), you may be taking a blood thinning medication. These medications will usually need to be stopped before your operation. Please notify your urologist if you are taking a blood thinning medication at least two weeks before your operation. You will be given instructions on when to stop taking these medications. Do not stop taking them without discussing it with your urologist.

Common blood thinning medications include:

- Apixaban (*Eliquis*)
- Clopidogrel (*Plavix, CoPlavix, Iscover, Clovix, Piax, Plavicor*)
- Dabigatran (*Pradaxa*)
- Dalteparin (*Fragmin*)
- Dipyridamole (often combined with aspirin) (*Assasantin, Persantin, Diasp*)
- Enoxaparin (*Clexane*)
- Prasugrel (*Effient*)
- Rivaroxaban (*Xarelto*)
- Ticagrelor (*Brilinta*)
- Warfarin (*Marevan, Coumadin*)

Vitamins, supplements and complementary medications

Two weeks prior to the operation it is important to stop taking Tumeric and Omega-3 fatty acid supplements such as fish oil, krill oil, salmon oil or calamari oil, as they can cause blood thinning.

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Diabetic medications

If you take medications for diabetes these may need to be stopped or adjusted the night before or the morning of your operation. Please notify your urologist if you are taking any medications for diabetes.

Common medications for diabetes include:

- Acarbose (*Glucobay*)
- Alogliptin (*Nesina*)
- Exenatide (*Byetta, Bydureon*)
- Gliclazide (*Glyade, Mellihexal, Nidem, Diamicron, Oziclide*)
- Glibenclamide (*Daonil, Glimef*)
- Glipizide (*Melizide, Minidiab*)
- Glimepride (*Amaryl, Dimirel, Aylide, Diapide*)
- Linagliptin (*Trajenta*)
- Liraglutide (*Victoza*)
- Metformin (*Diabex, Diaformin, Formet, Metforbell, Glucohexal, Glucomet, Glucophage, Metex*)
- Pioglitazone (*Actos*)
- Rosiglitazone (*Avandia*)
- Saxagliptin (*Onglyza*)
- Sitagliptin (*Januvia*)
- Sitagliptin/Metformin (*Janumet*)
- Vildagliptin (*Galvus*)

Please notify your urologist if you use insulin injections or an insulin pump.

GLP-1 receptor agonists for diabetes and weight loss

Common GLP-1 receptor agonists include:

- Dulaglutide (*Trulicity*)
- Semaglutide (*Ozempic, Wegovy, Rybelsus*)
- Liraglutide (*Victoza*)
- Tirzepatide (*Mounjaro, Zepbound*)

Do not stop taking this medication before your surgery.

If you are taking one of these medications, you must have a clear fluid diet on the day before your operation. You will then need to fast (nothing to eat, drink or chew) for a minimum of 6 hours before your operation.

For example, if your operation is at 8am on Monday, you should have clear fluids for breakfast, lunch, and dinner on Sunday, then fast from 2am Monday.

Clear fluids include water, pulp-free clear fruit juice, clear cordial, green tea, black tea, and black coffee. It excludes fluids containing milk, particulate matter, soluble fibre (such as metamucil) and jelly.

If you require further information regarding these medications, clear fluid diet or fasting, please contact your anaesthetist or anaesthetic group. Their contact information is located on your booking letter.

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SGLT-2 inhibitors for diabetes and heart disease

A group of medications called *SGLT-2 inhibitors* are very dangerous if taken around the time of surgery. They are usually prescribed for diabetes but can also be used for heart disease. They must be stopped for 3 days prior to your operation (do not take on the two days prior to the operation or on the day of the operation). They must not be restarted after your operation until you are eating and drinking normally. Please notify your urologist if you are taking one of these medications.

Common SGLT-2 inhibitors include:

- Canagliflozin (*Inovokana*)
- Dapagliflozin (*Forxiga*)
- Empagliflozin (*Jardiance*)
- Ertugliflozin (*Steglatro*)
- One of the above medications in combination with Metformin (*Jardiamet, Segluromet, Xigduo*)
- One of the above medications in combination with another drug (*Glyxambi, Qtern, Steglujan*)