



Getting started with INVOKANA[®]

INVOKANA[®] is used along with diet and exercise...



In adults with type 2 diabetes to:

>> Improve blood sugar levels



In adults with type 2 diabetes and an increased cardiovascular risk to lower your risk of:

- >> Dying from events related to your heart or blood vessels
- >> Having nonfatal heart attacks
- >> Having nonfatal strokes



In adults with type 2 diabetes and diabetic kidney disease to lower your risk of:

- >> Worsening kidney function to the point where your kidneys fail and you need dialysis
- >> Dying from events related to your heart or blood vessels

Pr **Invokana[®]**
canagliflozin tablets



INVOKANA® in type 2 diabetes

Type 2 diabetes is a condition in which your body does not make enough insulin, and/or does not use the insulin that your body produces as well as it should. When this happens, sugar builds up in the blood. This can lead to serious problems.

In addition to diet and exercise in adults with type 2 diabetes, INVOKANA® can be used to improve blood sugar levels:

- >> alone, in people who cannot take metformin
- >> along with metformin
- >> along with a sulfonylurea
- >> along with metformin and a sulfonylurea
- >> along with metformin and pioglitazone
- >> along with metformin and sitagliptin
- >> along with insulin (with or without metformin)



If you have type 2 diabetes *and* have (or may have) health problems due to your heart or blood vessels, INVOKANA® can be used along with diet and exercise to lower your risk of:

- >> Dying from related events
- >> Having a nonfatal heart attack
- >> Having a nonfatal stroke



If you have type 2 diabetes *and* your kidneys are damaged as a result of your diabetes, INVOKANA® can be used along with diet and exercise to lower your risk of:

- >> Worsening kidney function to the point where your kidneys fail and you need dialysis
- >> Dying from events related to your heart or blood vessels



Start your day with INVOKANA®

INVOKANA® should be taken once a day. It is best to:

- >> take INVOKANA® before the first meal of the day
- >> swallow the tablet whole with water
- >> try to take it at the same time each day

INVOKANA® can be taken with or without food. The usual starting dose is 100 mg. Your doctor may increase your dose to 300 mg, but if you have a kidney problem, your dose may stay at 100 mg. Before starting INVOKANA®, your doctor will do tests to see how well your kidneys are working.

Tell your doctor or pharmacist about any other medicines or non-prescription products you are taking, have recently taken, or might take. INVOKANA® may interact with other medicines, including:

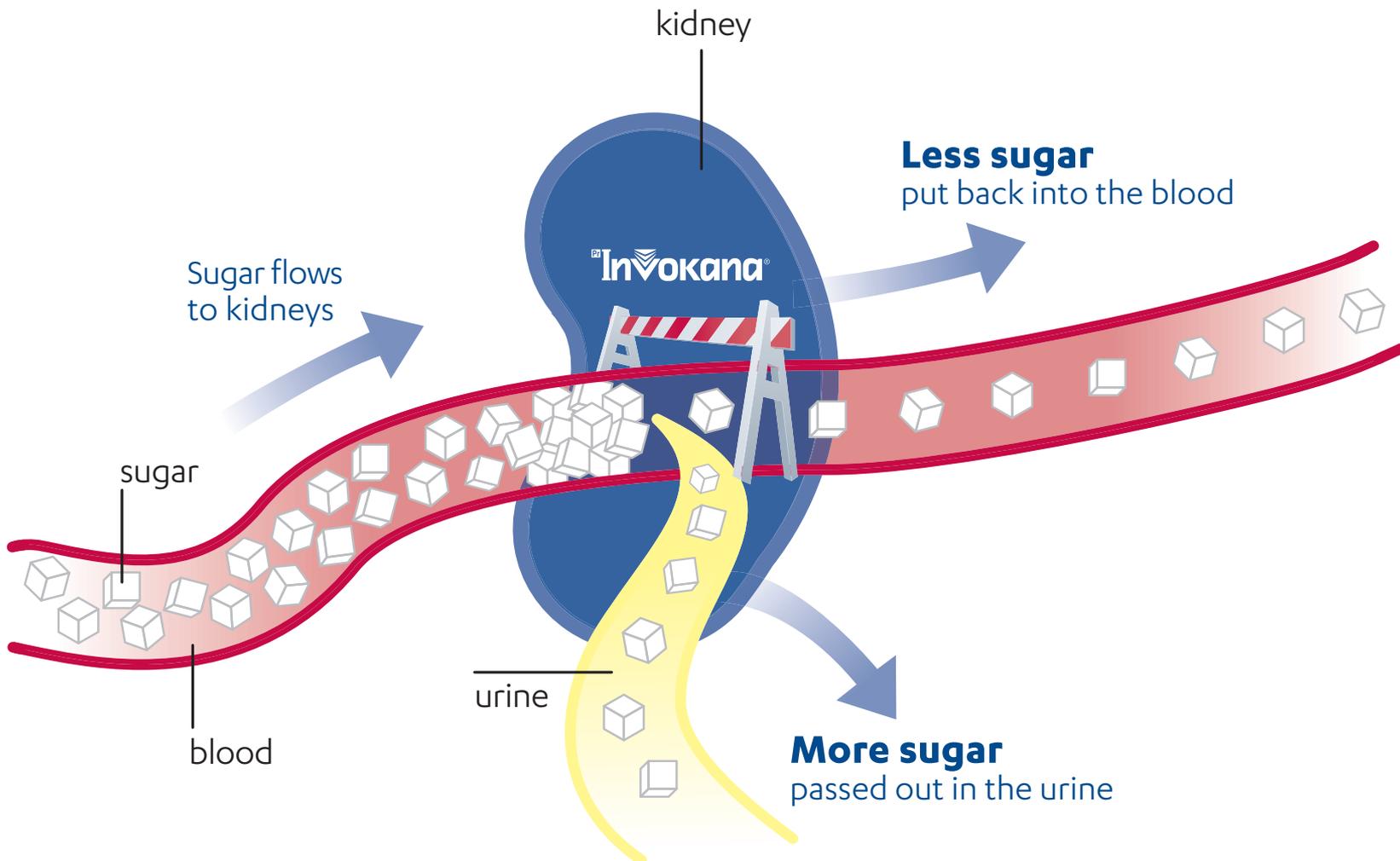
- >> Digoxin, a medicine used to treat heart problems
- >> Furosemide or other diuretics (water pills)
- >> An angiotensin-converting-enzyme (ACE) inhibitor or an angiotensin receptor blocker (ARB) (to lower your blood pressure)
- >> Insulin or a sulfonylurea (such as glimepiride, gliclazide, or glyburide)
- >> Carbamazepine, phenytoin, or phenobarbital
- >> Efavirenz or ritonavir
- >> Rifampin
- >> St. John's wort



How INVOKANA® works

INVOKANA® helps eliminate sugar from your body

Normally, after sugar is filtered by the kidneys, almost all of it is *reabsorbed* (put back) into the blood. INVOKANA® reduces the amount of sugar that's allowed to return to the body by increasing the amount that's passed out through urine.





Strategies to help manage two very common side effects of INVOKANA®

As with any medicine, you may experience side effects while taking INVOKANA®. People taking it in combination with a sulfonylurea or insulin may experience low blood sugar (also called “hypoglycemia”). Vaginal yeast infections are also possible with INVOKANA®. **Tell your doctor or pharmacist** if you notice symptoms of these side effects.

Tips to help prevent yeast infections:

- >> Wear cotton underwear.
- >> Change out of wet clothes, such as swimsuits or workout clothes, as soon as possible.
- >> Stay out of hot tubs and very hot baths.

Symptoms of a vaginal yeast infection include vaginal odour, white or yellowish vaginal discharge, and/or itching.

What to do if you experience hypoglycemia:

1. Eat or drink a fast-acting carbohydrate (15 g), such as 1 tbsp of honey, 6 LifeSavers®, or 150 mL of juice or soft drink.
2. Wait 15 minutes then check your blood sugar. If it's still low (<4.0 mmol/L), repeat these 2 steps.
3. Once your blood sugar is >4.0 mmol/L, eat a snack that includes both protein and starch (such as 1 piece of cheese and 7 crackers), unless your next meal is within an hour.

Symptoms of low blood sugar include shaking, sweating, pale skin, rapid heartbeat, change in vision, hunger, headache, change in mood, and feeling anxious or confused. Note that hypoglycemia is more likely if you are also taking a sulfonylurea or insulin.



Other possible side effects of INVOKANA®

Speak with your doctor or pharmacist if you notice any of the following other possible side effects:

Common side effects

- >> Yeast infection of the penis (red, swollen, itchy head of penis; thick, lumpy discharge under foreskin; unpleasant odour; difficulty retracting foreskin; pain passing urine or during sex)
- >> Urinary tract infection (burning sensation when urinating; pelvis or mid-back pain; increased need to urinate)
- >> Constipation
- >> Bone fracture (broken bones)
- >> Skin ulcer (a break or sore on the skin, predominantly of the lower leg)

Uncommon side effects

- >> Blocked or narrow blood vessels, called “peripheral ischemia” (leg pain with walking that gets better with rest; poor circulation; bluish, cold skin; poor nail and hair growth)
- >> Dehydration (feeling very thirsty, weak, or tired; passing little or no urine; fast heartbeat)
- >> Low blood pressure (dizziness, fainting, or light-headedness, which may occur when you go from lying to sitting or standing up)
- >> Kidney problems (nausea; vomiting; diarrhea; muscle cramps; swelling of the legs, ankles, feet, face, and/or hands; shortness of breath; changes in frequency of urination and colour and amount of urine)

If you experience a rash or hives while taking INVOKANA® (an uncommon side effect), stop taking it and call your doctor or pharmacist. Inflammation of the pancreas (a rare side effect called “pancreatitis”, with symptoms including severe stomach pain that lasts and gets worse when you lie down, nausea and vomiting) is another reason to call your doctor or pharmacist.

You should also tell your doctor if you experience any side effect not included in this list, or if you need to be hospitalized for a major surgery, serious infection, or serious medical illness.

Important safety information

Before taking INVOKANA®, talk to your doctor or pharmacist if you:

- >> Have an increased chance of developing diabetic ketoacidosis (or “DKA”, a complication of diabetes), including if you:
 - are dehydrated or suffer from excessive vomiting, diarrhea, or sweating;
 - are on a very low-carbohydrate diet;
 - have been fasting for a while;
 - are eating less, or there is a change in your diet;
 - drink a lot of alcohol;
 - have or have had problems with your pancreas;
 - are hospitalized for major surgery, serious infection, or serious medical illnesses or are about to have major surgery;
 - have an acute illness;
 - have sudden reductions in insulin dose;
 - have diabetic kidney disease;
 - have a history of DKA.
- >> Have an increased chance of needing an amputation, including if you:
 - have a history of amputation;
 - have heart disease or are at risk for heart disease;
 - have had blocked or narrowed blood vessels, usually in your leg;
 - have damage to the nerves in your leg;
 - have had diabetic foot ulcers or sores;
 - have a lower limb infection;
 - are dehydrated.
- >> Have or have had low blood pressure (also known as “hypotension”) and are taking medicines to remove excess water from your body (called “diuretics” or water pills) or medicines to lower your blood pressure (such as angiotensin-converting-enzyme inhibitors or angiotensin receptor blockers). Taking INVOKANA® with any of these medicines may increase your risk for dehydration and/or low blood pressure
- >> Are older than 65 years of age
- >> Are taking medicines to lower your blood sugar. Take precautions to avoid the potential for low blood sugar while driving or using heavy machinery
- >> Are taking medicines used to treat pain and reduce inflammation and fever (known as nonsteroidal anti-inflammatory drugs or “NSAIDs”). Taking INVOKANA® with these medicines can increase the risk for kidney problems
- >> Have liver problems
- >> Have heart problems
- >> Have intolerance to some milk sugars. INVOKANA® tablets contain lactose
- >> Are pregnant or are planning to have a baby. INVOKANA® should not be used during pregnancy
- >> Are breastfeeding. INVOKANA® should not be used during breastfeeding
- >> Often get urinary tract infections

INVOKANA® is not recommended for use in people under 18 years of age.

INVOKANA® will cause your urine to test positive for sugar (glucose).

Taking INVOKANA® increases your risk of breaking a bone. Talk to your doctor about factors that may increase your risk of bone fracture.

While taking INVOKANA®, your doctor may order a blood test to check your kidney function, blood fat levels (low-density lipoprotein cholesterol, or “LDL-C”), amount of red blood cells in your blood (hematocrit) and potassium blood levels.

INVOKANA® may cause a condition called “necrotizing fasciitis of the perineum” (the area between and around the anus and genitals). This is a rare but serious and potentially life-threatening infection that can affect both men and women. It is also known as “Fournier’s gangrene” and requires urgent treatment. If you experience tenderness, redness or swelling of the genitals or the area from the genitals back to the rectum, especially if you also have a fever or are feeling very weak, tired, or uncomfortable, seek medical attention immediately. These may be signs of Fournier’s gangrene.

If you are going to have a surgery and after your surgery, or if you are hospitalized for a serious infection, a serious medical illness or a major surgery, your doctor may stop your INVOKANA®. Talk to your doctor about when to stop taking INVOKANA® and when to start it again. Your doctor will check for ketones in your blood or urine.

INVOKANA® may cause dizziness or light-headedness. DO NOT drive or use machines until you know how the medicine affects you.

Serious warnings and precautions

DKA

- >> DKA is a serious and life-threatening condition that requires urgent hospitalization. DKA has been reported in patients with type 2 diabetes mellitus, with normal or high blood sugar levels, who are treated with INVOKANA® or with other sodium-glucose co-transporter 2 inhibitors. Some cases of DKA have led to death
- >> **Seek medical attention right away and stop taking INVOKANA® immediately** if you have any of the following symptoms (even if your blood sugar levels are normal): difficulty breathing, nausea, vomiting, stomach pain, loss of appetite, confusion, feeling very thirsty, feeling unusually tired or sleepy, a sweet smell to the breath, a sweet or metallic taste in the mouth, or a different odour to urine or sweat
- >> If you have a history of diabetic kidney disease, you may have a higher chance of DKA while you are taking INVOKANA®
- >> INVOKANA® should not be used in patients with type 1 diabetes
- >> INVOKANA® should not be used to treat DKA or if you have a history of DKA

Lower Limb Amputation

- >> INVOKANA® may increase your risk of lower limb amputations. Amputations mainly involve removal of the toe or part of the foot but could also involve the leg, below or above the knee. Some people had more than one amputation, some on both sides of the body
- >> Seek medical attention if you have new pain or tenderness, any sores, ulcers, or infections in your leg or foot. Your doctor may decide to stop your INVOKANA® if you have any of these signs or symptoms. Talk to your doctor about proper foot care and keeping hydrated

Knowing your numbers

Routine tests can help you and your doctor see how you're doing, and whether any lifestyle or medication changes may be needed.

Your doctor may recommend regular blood sugar tests, including:

A1c	This is an average measure of your blood sugar control over the last 2 to 3 months.
FPG	Your FPG (or "fasting plasma glucose") is your blood sugar level before meals.
PPG	Your PPG (or "post-prandial plasma glucose") is your blood sugar level 2 hours after eating.

Talk to your doctor about your personal blood sugar targets and fill them in below:

	A1c	FPG (mmol/L)	PPG (mmol/L)
Recommended targets for most people with diabetes:	7.0% or less	4.0 to 7.0	5.0 to 10.0 <i>(but 5.0 to 8.0 if not at A1c target)</i>
My blood sugar level targets:			

Your doctor may check your kidney function with an eGFR test:

>> Your **eGFR** (or "estimated glomerular filtration rate") is a blood test that measures how well your kidneys are doing their job of filtering waste from your blood. The lower the eGFR, the worse the kidneys are working.

Ask your doctor about your current renal function and indicate below what your most recent eGFR test showed:

Reference eGFR range (mL/min/1.73 m ²)	My last eGFR result: _____	This result means my kidney function is:
>90	<input type="checkbox"/>	Normal <i>(diagnosis of DKD based on other signs of kidney damage)</i>
60–89	<input type="checkbox"/>	Mildly decreased
30–59	<input type="checkbox"/>	Moderately decreased
15–29	<input type="checkbox"/>	Severely decreased
<15	<input type="checkbox"/>	<i>This is called kidney failure or "end-stage kidney disease"</i>

Sick day management

If you become sick and are unable to drink enough fluid to keep hydrated, you should talk to your healthcare provider and make a plan for what to do, including the possibility of stopping some medications temporarily.

Prepare a sick day management plan with your healthcare provider to use should you fall ill.

Use this space to list what medications you are taking and what to do if you get sick:

Medication	Action

Please check with your pharmacist before using over-the-counter medications and discuss all changes in medications with your healthcare professional.

For more information on type 2 diabetes or diabetic kidney disease, visit:
<http://guidelines.diabetes.ca/patient-resources>



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