

## SGLT2i Induced Refractory Mycotic Infections.. Organ vs Tissue

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### LETTER

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SGLT2 inhibitors are first among the anti-hyperglycemic agents to have demonstrated a significant impact on the cardio-renal complications of diabetes and have been quickly incorporated into guideline recommendations as agents for preferential use irrespective of HbA1C in patients with established ASCVD or risk for ASCVD, heart failure & CKD with proteinuria, in the last two settings with or without diabetes [1]. They are useful agents for glycemic control without inherent hypoglycemic potential and with clinically meaningful weight loss and BP reduction. They are being extensively used for these indications but one of the major side effects that limit their use is genital infections, the incidence of which has been variously quoted between 2.5 to 6.5 % [2]. Some authors have concluded that it is lesser than that of the Caucasian population whereas others have found a much higher incidence. The product insert recommends the use of anti-fungal treatment which in most cases leads to lasting relief but some individuals continue to have persistent symptoms leading to discontinuation of these agents. While various other steps have been proposed to minimize the risk like maintaining genital hygiene and co-administration of DPP4 inhibitors as anti-hyperglycemic agents [3], we propose in cases that persist to have symptoms a simple procedure which can permit administering this drug with the attendant benefits which the patients would otherwise be deprived of... the circumcision.

Circumcision is a procedure accepted and mandated in some religious sects and has been known to be associated with a very low incidence of genital mycosis with SGLT2 inhibitors, besides improving genital hygiene and lowering the risk of penile cancer [4,5]. At first blush, the idea looks outlandish but in cases that need it will prevent pushing these needy patients into the pre-SGLT2i era given the high cost and low acceptance of the other alternate GLP1 analogues. Thus, protecting the organ(the heart and kidney) at the cost of the tissue (foreskin).

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