

Metformin for Hidradenitis Suppurativa

This leaflet aims to answer any questions which you might have about taking metformin for the treatment of Hidradenitis Suppurativa (HS). If you have any further questions or concerns, please speak to a doctor or nurse caring for you.

Please read this leaflet along with the manufacturer's leaflets for metformin, which will be provided with your medicines. Copies of these leaflets are also available to access from www.medicines.org.uk/emc

(Please be aware that the manufacturer's leaflets may not mention HS – see paragraph below, "Taking an unlicensed medicine".)

What is metformin?

Metformin is an oral hypoglycaemic agent, commonly used in the management of Type 2 Diabetes Mellitus to treat high glucose levels in the body. Metformin is also used off-label in the treatment of Polycystic Ovarian Syndrome (PCOS) and Metabolic Syndrome.

Metformin has been shown to be effective in the treatment of HS, although its exact mechanism of action in HS is unknown. It is known that HS is associated with PCOS, a condition in which there is commonly an androgen (hormone) imbalance. It has been suggested that in HS, metformin acts mainly by blocking the activity of these androgen hormones and reduces glucose resistance. (Notes 2, 5 and 6 below.)

Your doctor feels that you would benefit from this treatment and has recommended it for you.

Taking an unlicensed medicine

Metformin is licensed in the UK for the treatment of Type 2 Diabetes Mellitus. However, its use in the treatment of HS is 'unlicensed'. This treatment has also been approved by the British Association of Dermatologists (7). Your doctor will discuss with you why s/he is recommending metformin, so please ask them if you have any questions.

Read the manufacturer's printed information leaflet supplied with the medicine before you start treatment.

How do I take the medicine?

Take metformin exactly as directed by your doctor. Metformin is a tablet taken by mouth and it comes in two different preparations: immediate release which is taken three times a day and modified release which is taken twice a day. Usually, for the treatment of HS,

patients are advised to start with one (500mg immediate release or 500mg/750mg modified release) tablet a day and after one to two weeks increasing the dose as directed by your doctor.

To reduce the likelihood of side effects, you should take metformin with or just after food or a meal. You should swallow the tablets whole with a glass of water and must not crush or chew the tablets. (3)

What should I do if I forget to take the medicine?

If you miss a dose of metformin, you should skip the missed dose and take the next dose at the usual time. **Do not** take two doses to make up for a forgotten dose. (3)

Are there any side effects?

The manufacturer's information leaflet that comes with the medicine will list all known side effects associated with metformin. Please refer to this for further information.

Some of the more important or common side effects are discussed below.

IMPORTANT - You MUST seek urgent medical attention if you suffer from any of the following:

- Wheeziness, difficulty in breathing, swelling of eyelids, face or lips, rash or itching (especially affecting the whole body). These may be signs of a severe allergic reaction.
- Dyspnoea (difficult or laboured breathing), muscle cramps, abdominal pain, hypothermia (low body temperature), vomiting or asthenia (abnormal weakness or lack of energy). These may be signs of lactic acidosis.

Very common metformin side effects may include:

- Nausea or upset stomach
- Diarrhoea
- Loss of appetite.

These side effects are most frequent at the start of treatment and normally resolve spontaneously. They may be reduced by taking metformin with food and by spreading the doses out over the day. If side effects continue or are not tolerable, speak to your doctor.

Other side effects may include:

- Changes in taste (*common*)
- Vitamin deficiencies, particularly vitamin B12 (*common*)
- Skin reactions including redness (erythema) or itching (urticaria) (*very rare*)

- Abnormalities in liver function tests of hepatitis, resolves spontaneously with cessation of treatment (*very rare*) (4).

Metformin does not cause hypoglycaemia (low blood sugar) when taken alone but can do so when combined with other antidiabetic medications.

If you experience any other symptoms which you think may be due to metformin or you have any concerns about side effects, please speak to your doctor, nurse or pharmacist.

Will I need to be monitored?

You will need to have your renal (kidney) function checked before commencing metformin and at least annually thereafter. This is checked with a simple blood test. If you have risk factors for renal impairment or if your renal function begins to deteriorate, you may need to have it checked every six months. (1)

Is there anything else I need to know?

If you become dehydrated (e.g. from severe diarrhoea or vomiting, fever or reduced fluid intake), metformin should be temporarily discontinued and you should contact your GP.

Metformin may need to be temporarily discontinued if you are undergoing a scan which requires the injection of a diagnostic dye into the veins or if you are undergoing surgery under general, spinal or epidural anaesthesia. Your renal function may need to be checked before metformin is restarted. Your doctor will tell you when to restart your metformin. (4)

Avoid excessive intake of alcohol whilst taking metformin as this may increase your risk of lactic acidosis.

How do I get a repeat prescription?

Your dermatologist will give you a prescription at your dermatology outpatient appointment. If you are stable and are not having any problems with your medications, your GP *may* be able to prescribe them for you. Please discuss this with your dermatologist. Either way, you will continue to be followed up regularly at the hospital.

Useful sources of information

The British Association of Dermatologists [British Association of Dermatologists \(bad.org.uk\)](http://www.bad.org.uk)

Contact us

If you have any questions or concerns about your treatment or any side effects that you may be experiencing, please contact the Dermatology secretaries on 020 8725 2500 (Monday to Friday, 9am to 5pm). Please leave an answer phone message with your details (including hospital number and telephone number) and brief explanation of the problem. You can

expect to be called back the same or the next day between 9am-5pm. Please ensure that you answer calls from UNKNOWN telephone numbers during this time.

Out of hours if you think your problem cannot wait until the next working day, please contact an out of hours GP or attend the Emergency Department if you think your issue is life threatening.

For more information leaflets on conditions, procedures, treatments and services offered at our hospitals, please visit www.stgeorges.nhs.uk

Additional services

Patient Advice and Liaison Service (PALS)

PALS can offer you on-the-spot advice and information when you have comments or concerns about our services or the care you have received. You can visit the PALS office between 9.30am and 4.30pm, Monday to Friday in the main corridor between Grosvenor and Lanesborough wings (near the lift foyer).

Tel: 020 8725 2453 **Email:** pals@stgeorges.nhs.uk

NHS Choices

NHS Choices provides online information and guidance on all aspects of health and healthcare, to help you make decisions about your health.

Web: www.nhs.uk

NHS 111

You can call 111 when you need medical help fast but it's not a 999 emergency. NHS 111 is available 24 hours a day, 365 days a year. Calls are free from landlines and mobile phones. **Tel:** 111

AccessAble

You can download accessibility guides for all our services by searching 'St George's Hospital' on the AccessAble website (www.accessable.co.uk). The guides are designed to ensure everyone – including those with accessibility needs – can access our hospital and community sites with confidence.



Notes.

- (1) [Metformin hydrochloride | Drugs | BNF | NICE](#)
- (2) [Metformin - For the dermatologist - PMC \(nih.gov\)](#)
- (3) [How and when to take metformin - NHS \(www.nhs.uk\)](#)
- (4) [Metformin 500mg \(PL 16363/0111\) tablets - Summary of Product Characteristics \(SmPC\) - \(emc\) \(medicines.org.uk\)](#)
- (5) [Metformin use in hidradenitis suppurativa - PubMed \(nih.gov\)](#)
- (6) [Metformin for the treatment of hidradenitis suppurativa: a little help along the way \(piel-l.org\)](#)
- (7) [Hidradenitis-suppurativa-PIL-May-2021.pdf \(bad.org.uk\)](#)