

Med E-mail (June 2019)

Medicines in Hot Weather

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There are certain risk factors which increase the risk of a heat-related illnesses during periods of hot weather. These include older age and suffering from chronic or severe illness. Side effects of some medicines which patients take for these illnesses may affect their response to heat and increase the risk of heatstroke and other complications. Examples are listed in the table below:

Table 1: Patient reactions to medicines that could pose problems in a heatwave

Reaction	Example medicines
Dehydration or electrolyte imbalance	Diuretics and ACE inhibitors/ angiotensin-II receptor blockers (ARBs) Drugs that cause vomiting or diarrhoea.
Increased drug toxicity	Dehydration might concentrate some drugs in the body and cause symptoms of toxicity. E.g. Lithium Direct exposure to heat may increase the release of medicines from some transdermal formulations, causing toxicity e.g. fentanyl patches
Impaired renal function	Non-steroidal anti-inflammatory drugs (NSAIDs), ACE inhibitors/ARBs and metformin
Impaired sweating (leading to raised body temperature)	Medicines with antimuscarinic actions (e.g. amitriptyline, hyoscine, oxybutynin, procyclidine). Topiramate.
Reduced thirst	ACE inhibitors/ARBs, neuroleptics, anti-Parkinson drugs.
Hypotension- may increase risk of fainting	Antihypertensives and vasodilators (e.g. nitrates, calcium channel blockers), some tricyclic antidepressants.

Actions for clinicians:

- During periods of hot weather, pay particular attention when reviewing patients who are taking the medications listed above; it may be necessary to reduce dose or withhold treatment temporarily.
- Consider reviewing fluid allowance in patients with fluid restriction