

# **Angiotensin Receptor - Neprilysin Inhibitor (ARNI)**

#### Most common ARNIs

✓ Ask your healthcare provider to check o	tt
the one you are taking.	
☐ sacubitril/valsartan (Entresto <sup>™</sup> )	
Other	

# What is an Angiotensin Receptor - Neprilysin Inhibitor (ARNI)?

It is a combination of two medications, sacubitril and valsartan.

Valsartan is an angiotensin II receptor blocker (ARB). It stops your body from making stress hormones, which constrict or narrow blood vessels. Stress hormones make it harder for the heart to pump blood around the body. By blocking the stress hormone, blood vessels relax, and blood flows more easily. This reduces the work of your heart and lowers your blood pressure.

Sacubitril inhibits or blocks an enzyme called neprilysin (a neprilysin inhibitor). When this enzyme is blocked, it allows helpful substances to stay in the body longer. These substances (called natriuretic peptides) help blood vessels relax, allowing your body to get rid of excess fluid. This makes it easier for your heart to pump blood.

#### What are ARNIs used for?

ARNIs are used to treat heart failure by lowering the blood pressure and getting rid of excess fluid. Together, these medicines reduce the work of the heart and may improve your ejection fraction\*.

### How does an ARNI help with heart failure?

When used with other heart failure medications, it may:

- Help you live longer
- Improve your heart failure symptoms
- Prevent you from needing to be in the hospital for heart failure treatment
- Slow the worsening of your heart failure

## What if you miss taking a dose?

If it is more than 4 hours until your next dose, take the missed dose then take your usual dose at the usual time.

If it is less than 4 hours until your next dose, just take your next scheduled dose. Do not take the missed dose.

Never take two doses at the same time.

If you have questions about taking your medications, or missed doses, contact your pharmacist, your healthcare provider, or in British Columbia call 8-1-1.

# Do not take any of the following without checking with your healthcare provider

- Alcohol
- Cough or cold medicines
- Black licorice
- Aboriginal herbs
- ✗ Herbal or Chinese medicines
- Anti-inflammatory medicines (such as Advil, Ibuprofen, Motrin, Naproxen, Aleve, Celebrex, Indocid)
- Angiotensin Converting Enzyme Inhibitor (ACE-I)
- An additional Angiotensin II Receptor Blocker (ARB)

<sup>\*</sup>To learn more about 'ejection fraction', see 'Understanding Heart Failure – The Basics'. Go to the BC Heart Failure Network web site - 'For Patients and Families'. Select 'Co-Management Resources' and open 'Heart Failure 101'.

## Contact your healthcare provider if any of these side effects continue or get worse

Common Side Effects	What to do
Lowering of blood pressure	Do not do anything that could lower your blood pressure even further.  Examples:  Do not drink alcohol.  Do not do any strenuous exercise.  (Always check with your healthcare provider first).  Do not take really hot showers or baths.  Do not use a hot tub.
Dizzy Lightheaded	Get up slowly when changing position, such as moving from lying to sitting or sitting to standing.  Dizziness usually goes away after your body gets used to the medication.
Decrease in how much you pee	Call your healthcare provider if:  - Your pee (urine) is dark coloured <u>and</u> - You are not going pee (urinating) as much as you normally do.
Dry Cough	If the cough gets worse or becomes a problem for you, contact your healthcare provider.
Tired or weak	Balance rest and activity
Nausea or Stomach upset	If you are currently taking this medication:  - With food, try taking it without food.  - Without food, try taking it with food.  Get rid of strong smells.  Open windows to get fresh air.  Use a fan, air deodorizers, or air fresheners.
Serious but not Common Side Effects	What to do
Trouble breathing Difficulty swallowing Swelling of your face, lips, tongue	Stop taking this medication immediately.  Contact your doctor or nurse right away or go to your nearest emergency department.

## **Medication Tips**

- ✓ If your healthcare provider is switching your medication from an ACE-I to an ARNI, you must wait at least 36 hours after your last dose of the ACE-I before you take your first dose of ARNI.
- Do not take an ARNI if you are:
  - Pregnant or planning to become pregnant (It can cause injury and even death to your unborn baby).
  - **×** Breastfeeding.
  - × 18 years or younger.
- If your medication dose is being increased or decreased, your healthcare provider will want to do a blood test to check your potassium level and kidney function.
- Do not suddenly stop taking your ARNI without checking with your healthcare provider first, except if you are having trouble breathing, difficulty swallowing, or have swelling of your face, lips or tongue.
- Take your ARNI exactly as directed by your healthcare provider, even if you feel well.

- ARNI's can increase the potassium level in your body.
  - Do not take potassium supplements unless prescribed by your health-care provider.
  - Check with your healthcare provider before using products that contain potassium such as salt substitutes.
- Certain medications can increase your risk of side effects. Always tell your healthcare provider if you are taking any of these medications:
  - cholesterol lowering medication (simvastatin, atorvastatin)
  - water pills (furosemide)
  - medications used to treat erectile dysfunction (Viagra)
  - medications used to treat pulmonary hypertension
  - medications that increase potassium in the blood (spironolactone, eplerenone)
  - lithium
  - aliskiren (Rasilez)
  - cyclosporine
  - medications to treat HIV or hepatitis C
  - medications that may decrease your blood pressure (including nitroglycerine)

### For more information about ARNIs:

- Go to The Heart and Stroke Foundation of Canada (heartandstroke.com)
   Search 'neprilysin' or go to Neprilysin inhibitor/Angiotensin II receptor blocker under heart disease treatment.
- Call 8-1-1 if you live in British Columbia.