(Manufacturer to supply paragraph on potentiating drugs.)

Loss of Control of Blood Sugar: Identical to sulfonylurea labeling.

Controlled Diabetic: A diabetic patient previously well-controlled on phenformin who develops laboratory abnormalities or clinical illness (especially vague and poorly defined illness) should be evaluated promptly for evidence of ketoacidosis or lactic acidosis. Evaluation should include serum electrolytes and ketones, blood glucose, and, if indicated, blood pH, lactate, and pyruvate levels. Acidosis of either form necessitates withdrawing phenformin and initiating other appropriate corrective measures.

Starvation Ketosis: This must be differentiated from insulin-deficient ketosis and is characterized by ketonuria with little or no glucosuria and relatively normal blood glucose levels. This may result from excessive dosage of phenformin or insufficient carbohydrate intake.